**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1115 / 09/30/2015

Beaufort / Corporation

10 JACOB WHITE RD

A'LELIA RESIDENTIAL CARE

10 JACOB WHITE RD

ACLINE PLACE

200 S ACLINE ST

YEMASSEE, SC 29945-7820 FACILITY #:843-466-0356

MILES, CARRIE R PH#: 843-466-0356

Facility Email: MILES.66@HOTMAIL.COM

Fac. Cont. Email: MILES.66@HOTMAIL.COM

Total Number of Licensed Beds 20

YEMASSEE, SC 29945-7820

MILES RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 2 Alzheimer Unit: No Max # Beds: 0 Resident Beds:

20 Resident Rooms: 12 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

CRC-1257 / 01/31/2016

CRC-0815 / 05/31/2016

COLUMBIA, SC 29224-3328

Richland / Corporation

**Total Number of Licensed Beds** 

CRC-1067 / 01/31/2016

PO BOX 23328

Florence / State

LAKE CITY, SC 29560-2635 FACILITY #:843-394-5677 1211 E NATIONAL CEMETERY RD

UWAGBAI, LINDA G PH#: 843-394-5707 FLORENCE, SC 29506-3240 Facility Email: GBARNES@FCDSN.ORG FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 8

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

ADDISON'S COMMUNITY CARE HOME

4013 PERCIVAL RD

COLUMBIA, SC 29229-8321 FACILITY #:803-463-1697

ADDISON-DOCTOR, SARAH PH#: 803-736-0455

Facility Email: ADMIN@UNIVERSALCARESOLUTIONS.COM

Fac. Cont. Email: SARDCT@BELLSOUTH.NET

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 9 Resident Rooms: 5

Staff Beds: 1 Staff Rooms: 1 Other Beds: Other Rooms: 0 0

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ADDISON'S COMMUNITY CARE HOME INC

AGAPE ASSISTED LIVING

Alzheimer Care: No

2705 LEAPHART RD Lexington / Corporation

Max # Residents: 0

WEST COLUMBIA, SC 29169-3335 FACILITY #:803-939-3000 2705 LEAPHART RD

WEST COLUMBIA, SC 29169-3335 UNTHANK, RUSSELL A PH#: 803-939-3000

ADMINISTRATOR@CAROLINAGARDENSWESTCOLUMBI AGAPE ASSISTED LIVING INC Facility Email:

Fac. Cont. Email: ADMINISTRATOR@CAROLINAGARDENSWESTCOLUMBI

Alzheimer Care: Yes Max # Residents: 33 Total Number of Licensed Beds: 184

Resident Beds: 184 Alzheimer Unit: Yes Max # Beds: 24 Resident Rooms: 144

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

Facility Email:

License#/Expiration County/Ownership Type Mailing Address Licensee

AGAPE ASSISTED LIVING AT GARDEN CITY

11951 GRANDHAVEN DR

MURRELLS INLET, SC 29576-7843 FACILITY #:843-357-0200

CRAWFORD, BRYAN M PH#:

JLITTLE@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1424 / 08/31/2016 Horry / Corporation

CRC-1478 / 07/31/2016

Lexington / Corporation

LEXINGTON, SC 29072-3892

Total Number of Licensed Beds 90

5422 AUGUSTA RD

11951 GRANDHAVEN DR

MURRELLS INLET, SC 29576-7843

Alzheimer Care: Yes Max # Residents: 111 Total Number of Licensed Beds: 111

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 111 Resident Rooms: 96

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > AGAPE ASSISTED LIVING OF LEXINGTON INC

AGAPE ASSISTED LIVING AT GARDEN CITY INC

AGAPE ASSISTED LIVING AT LEXINGTON

5422 AUGUSTA RD

LEXINGTON, SC 29072-3892 FACILITY #:803-520-5850

PIERCE, ROBERT M PH#: 803-520-5850

Facility Email: MPIERCE@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 25

Alzheimer Unit: Yes Max # Beds: 25 Resident Beds: 90 Resident Rooms: 80

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING AT NORTH CHARLESTON CRC-1288 / 02/29/2016

4550 GREAT OAK DR Charleston / Ltd. Liability 4550 GREAT OAK DR

NORTH CHARLESTON, SC 29418-5001 FACILITY #:843-760-0831

BLACKWELL, AMANDA HOPE PH#:

ABLACKWELL@AGAPESENIOR.COM AGAPE ASSISTED LIVING OF NORTH CHARLESTON LLC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds: 100** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 100 **Resident Rooms:** 56

> Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

> > CRC-1453 / 05/31/2016

CONWAY, SC 29527-4911

Horry / Corporation

2320 HWY 378

NORTH CHARLESTON, SC 29418-5001

AGAPE ASSISTED LIVING OF CONWAY

2320 HWY 378

Facility Email:

CONWAY, SC 29527-4911 FACILITY #:843-397-2273

WHITEHEAD, MATTHEW R PH#:

Facility Email: JTAYLOR@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 32 Total Number of Licensed Beds: 100

Alzheimer Unit: Yes Max # Beds: 32 Resident Beds: 100 Resident Rooms: 58

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING OF CONWAY INC

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1439 / 01/31/2016

Laurens / Corporation

420 W FARLEY AVE

AGAPE ASSISTED LIVING OF LAURENS

420 W FARLEY AVE

LAURENS, SC 29360-3039 FACILITY #:864-984-9844

MIMS, LYNN PH#:

Facility Email: BBURNS@AGAPESENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds: 100

LAURENS, SC 29360-3039

Alzheimer Care: Yes Max # Residents: 40

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 100 Resident Rooms: 72 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING OF ROCK HILL

1785 LEXINGTON COMMON DR

ROCK HILL, SC 29732-3299 FACILITY #:803-207-8000 BRAKEFIELD-MARZILLI, MARY LEEANN PH#: 803-207-8000

Facility Email: LWHITTLE@AGAPESENIOR.COM Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 12

Alzheimer Unit: Yes Max # Beds: 25 CRC-1486 / 12/31/2014 (Renewal Pending)

AGAPE ASSISTED LIVING OF LAURENS INC

York / Corporation

1785 LEXINGTON COMMON DR ROCK HILL, SC 29732-3299

AGAPE ASSISTED LIVING OF ROCK HILL INC

Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms: 90 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

AGAPE ASSISTED LIVING OF YORK

40 ROSS CANNON ST

YORK, SC 29745-1341 FACILITY #:803-684-0183 CALDWELL, MATTHEW A PH#: 706-681-7178 Facility Email: MCALDWELL@AGAPESENIOR.COM Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 25

Alzheimer Unit: Yes Max # Beds: 25 CRC-1368 / 06/30/2016 York / Corporation 1053 CENTER ST

WEST COLUMBIA, SC 29169-6749 AGAPE ASSISTED LIVING OF YORK INC

Alzheimer Care: Yes **Total Number of Licensed Beds: 143** 

Resident Beds: 143 Resident Rooms: 111

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

AGAPE AT HARBISON

990 COLUMBIA AVE

IRMO, SC 29063-2854 FACILITY #:803-749-7889

WARREN, JENNIFER PH#: 803-749-7889 Facility Email: DKEAR@AGAPESENIOR.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 40

Alzheimer Unit: No Max # Beds: 0 Lexington / Corporation 990 COLUMBIA AVE IRMO, SC 29063-2854

CRC-1348 / 06/30/2016

AGAPE HARBISON INC

Total Number of Licensed Beds 82

Resident Beds: 82 Resident Rooms: 63 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1317 / 06/30/2016

Richland / Corporation

4520 TRENHOLM RD

COLUMBIA, SC 29206-4425

AGAPE AT KATHWOOD INC

AGAPE AT KATHWOOD

4520 TRENHOLM RD

COLUMBIA, SC 29206-4425 FACILITY #:803-787-1234 HORTON, THOMAS V PH#: 803-749-7889

Facility Email:

ADMINISTRATOR@CAROLINAGARDENSWESTCOLUMBI

Fac. Cont. Email: No Facility Contact Email on Record Alzheimer Care: Yes

Alzheimer Unit: No

Max # Residents: 56

Max # Beds: 0

Total Number of Licensed Beds: 100 Resident Beds: 100 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ALDERSGATE AT THE OAKS

921 METHODIST OAKS DR

ORANGEBURG, SC 29115-1814 FACILITY #:803-531-2332

JENKINS, LAVEDA B PH#:

Facility Email: 921AOAKS@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1488 / 02/29/2016

Orangeburg / Non-Profit Corporation

PO BOX 1812

ORANGEBURG, SC 29116-1812 ALDERSGATE SPECIAL NEEDS MINISTRY

**Total Number of Licensed Beds** 

**Resident Beds:** 6 Resident Rooms: 6 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

ALEXANDER'S GOLDEN STARR COMMUNITY CARE HOME

218 GOLDEN STARR RD

SANTEE, SC 29142-9363 FACILITY #:803-854-2496 OUTLAW-THOMAS, DONNA S PH#: 803-854-3731 Facility Email: DONNAOUTLAW62@YAHOO.COM

Fac. Cont. Email: SHILANEDOT@AOL.COM

CRC-0171 / 08/31/2016

Orangeburg / Sole Proprietorship

PO BOX 405

SANTEE, SC 29142-0405 DONNA S OUTLAW-THOMAS

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0

Resident Beds: 8 Resident Rooms: 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: Other Rooms: 0 0

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ANDERSON OAKS ASSISTED LIVING

997 HWY 90

CONWAY, SC 29526-7520 FACILITY #:843-347-9280 COSGROVE-FLECKNOE, JANICE A PH#: 843-347-9280 JFLECKNOE.ANDERSONOAKS@YAHOO.COM Facility Email: Fac. Cont. Email: JFLECKNOE.ANDERSONOAKS@YAHOO.COM

Alzheimer Care: Yes

Max # Residents: 10 Alzheimer Unit: No Max # Beds: 0

CRC-1506 / 07/31/2016 Horry / Corporation

PO BOX 1678

CLEMMONS, NC 27012-1678 HERMAN L ANDERSON INC

Total Number of Licensed Beds 80

Resident Beds: 80 Resident Rooms: 60 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1400 / 09/30/2015

903 W BARTLETTE ST SUMTER, SC 29150-8005

ANGELIC'S PLACE LLC

Sumter / Ltd. Liability

ANGELIC'S PLACE

903 W BARTLETTE ST

SUMTER, SC 29150-8005 FACILITY #:803-775-1404

GREENE, SHIRLEY H PH#: 803-775-1404 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 11

Resident Beds: 11 Resident Rooms: 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ANOINTED RESIDENTIAL CARE

551 S SUMTER ST

SUMTER, SC 29150-5765 FACILITY #:803-883-4427

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1435 / 03/31/2016

Sumter / Partnership 551 S SUMTER ST

SUMTER, SC 29150-5765

**COREY T WRIGHT & DAISY BRADLEY** 

**Total Number of Licensed Beds** 

**Resident Beds:** 8 Resident Rooms: 5 Staff Beds: 0 **Staff Rooms:** 0 Other Rooms: 0

Other Beds: 0

**ANOINTED RESIDENTIAL CARE #2** 

511 S SUMTER ST

SUMTER, SC 29150-5754 FACILITY #:803-883-4032

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Unit: No

CRC-1502 / 03/31/2016 Sumter / Partnership 551 S SUMTER ST

SUMTER, SC 29150-5765

COREY T WRIGHT & DAISY BRADLEY

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 5

Max # Beds: 0 5 Resident Beds: Resident Rooms: 3

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

ANTONIO-STAPLES RESIDENTIAL CARE FACILITY

10745 HWY 78 E

SUMMERVILLE, SC 29483-8710 FACILITY #:843-821-8912

STAPLES, ERMELINDA M PH#: 843-821-8912

Facility Email: Z4TINKERBALL@AOL.COM

Fac. Cont. Email: ANTINIOSTAPLESRCF@COMCAST.NET

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0706 / 03/31/2016 Dorchester / Corporation

10745 HWY 78 E

SUMMERVILLE, SC 29483-8710

ANTONIO-STAPLES RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms: 10 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1492 / 05/31/2016

1500 TRAILHEAD CT

Greenville / Non-Profit Corporation

GREENVILLE, SC 29617-6226

UPSTATE SENIOR LIVING INC

ARBORETUM AT THE WOODLANDS AT FURMAN

50 ARBORETUM LN

Alzheimer Care: Yes

GREENVILLE, SC 29617-6227 FACILITY #:864-371-3100

BABBITT, CAROL S PH#: 864-371-3100

Facility Email: CBABBITT@THEWOODLANDSATFURMAN.ORG

Max # Residents: 16

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 64

CRC-1483 / 10/31/2015

LYMAN, SC 29365-9264

ASHLAN PROPERTIES LLC

CRC-1404 / 11/30/2015

Greenwood / Corporation

CHICAGO, IL 60611-7605

ASHLEY AID OPCO LLC

CRC-1376 / 06/30/2016

Charleston / Limited Liability

SNH SE ASHLEY RIVER TENANT LLC

330 N WABASH AVE STE 3700

415 BRENDA WAY

Spartanburg / Limited Liability

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 64 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**ASHLAN VILLAGE** 

415 BRENDA WAY

LYMAN, SC 29365-9264 FACILITY #:864-949-7825

AHO, ROBERT M PH#: 864-949-7825

Facility Email: BAHO@ASHLANVILLAGE.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 19 **Total Number of Licensed Beds** 72

Alzheimer Unit: Yes Max # Beds: 22 Resident Beds: 72 Resident Rooms: 58 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

**ASHLEY PLACE** 

526 HALTIWANGER RD

GREENWOOD, SC 29649-1799 FACILITY #:864-943-1933

MOORE, BRENT PH#:

Facility Email: BMOORE@ENLIVANT.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**ASHLEY RIVER PLANTATION** 

2333 ASHLEY RIVER RD

Facility Email:

CHARLESTON, SC 29414-4755 FACILITY #:843-766-9898

CURE, CANDY D PH#: 843-766-9898

No Facility Email on Record

Fac. Cont. Email: CCURE@ROYALOAKLEAF.COM

Alzheimer Care: Yes Max # Residents: 51 Total Number of Licensed Beds: 123

Alzheimer Unit: Yes Max # Beds: 51 Resident Beds: 123 Resident Rooms: 95

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1143 / 05/31/2016

Richland / Limited Liability

LOUISVILLE, KY 40202-4436

ATRIA FOREST LAKE

4405 FOREST DR

COLUMBIA, SC 29206-3103 FACILITY #:803-790-9800

HAMBY, LEIGH ANN PH#: 803-790-9800

Facility Email: LEIGH.HAMBY@ATRIASENIORLIVING.COM

Max # Residents: 16

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 60

CRC-0528 / 12/31/2015

Dillon / Limited Liability

412 PEE DEE CHURCH RD

**B & B ASSISTED LIVING II LLC** 

DILLON, SC 29536-7429

CRC-1461 / 12/31/2015

Richland / Corporation

213 LINGSTROM LN

COLUMBIA, SC 29212-3234

WG FOREST LAKE SH LLC

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 60 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms:

401 S 4TH ST STE 1900, BROWN WILLIAMSON TOWER

0

55

**B & B ASSISTED LIVING** 

Alzheimer Care: Yes

412 PEE DEE CHURCH RD

DILLON, SC 29536-7429 FACILITY #:843-774-0623

MAYNOR, BEVERLY PH#:

Facility Email: BEVMAYNOR@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 30

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 30 Resident Rooms: 16 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**B & J RESIDENTIAL CARE FACILITY** 

528 ATTERBURY DR

COLUMBIA, SC 29203-3002 FACILITY #:803-786-0011

DAVIS-EARGLE, EUGENIA M PH#: 803-786-0011 Facility Email: EMARIEEARGLE@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 5 Resident Beds: Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

B & J RESIDENTIAL CARE FACILITY LLC

**BACKHOME CARE FACILITY** 

140 CHECKERBERRY LN

CROSS, SC 29436-3599 FACILITY #:843-753-3899

LEE, NEOMIA C PH#: 843-753-3899

NCCBUTLERLEE@AOL.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds: 10

EUTAWVILLE, SC 29048-9256

BACKHOME CARE FACILITY INC

CRC-0567 / 01/31/2016

1547 ADDIDAS ST

Orangeburg / Corporation

**Resident Beds:** 10 Resident Rooms: 7 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0

Other Rooms:

hlcrc.rdf

0

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# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0732 / 09/30/2015

300 JACOBS HWY

Laurens / Non-Profit Corporation

CAROLINA CHRISTIAN MINISTRIES INC

**BAILEY MANOR** 

300 JACOBS HWY

CLINTON, SC 29325-9401 FACILITY #:864-833-3425

STANLEY, RITA G PH#: 864-833-3425

Facility Email: R.STANLEY@BAILEYMANOR.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CLINTON, SC 29325-9401

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 30 Resident Beds: 30 Resident Rooms:

116 ABBEY DR

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Greenwood / Limited Liability Limited Partnership

**BAYBERRY OF GREENWOOD** 

Alzheimer Care: Yes

116 ABBEY DR

GREENWOOD, SC 29649-8536 FACILITY #:864-223-6510

Max # Residents: 8

GAMBRELL, CATHY B PH#: 864-223-6510

Facility Email: THEBAYBERRY@NCTV.COM Fac. Cont. Email: THEBAYBERRY@NCTV.COM

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 23

GREENWOOD, SC 29649-8536

CRC-0589 / 05/31/2016

Resident Beds: 23 Resident Rooms: 23 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**EVERGREEN VILLAGES LIMITED PARTNERSHIP** 

**BAYBERRY OF GREER** 

309 NORTHVIEW DR

GREER, SC 29651-1340 FACILITY #:864-848-1935

PRITCHETT, NATASHA J PH#: 864-848-1935

Facility Email: GREER@THEBAYBERRYINN.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0595 / 07/31/2016

Greenville / Limited Liability Limited Partnership

309 NORTHVIEW DR GREER, SC 29651-1340

**EVERGREEN VILLAGES LIMITED PARTNERSHIP** 

Total Number of Licensed Beds 23

Resident Beds: 23 Resident Rooms: 23

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**BEARD RESIDENTIAL CARE FACILITY #1** 

123 N WARREN ST

TIMMONSVILLE, SC 29161-1443 FACILITY #:843-346-5272

BEARD, CATHERINE H PH#: 843-346-5272 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

CRC-0140 / 04/30/2016 Florence / Sole Proprietorship

123 N WARREN ST

TIMMONSVILLE, SC 29161-1443

CATHERINE H BEARD

Total Number of Licensed Beds: 10

**Resident Beds:** 10 Resident Rooms: 3 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**BEARD RESIDENTIAL CARE FACILITY #2** 

301 N ORANGE ST

TIMMONSVILLE, SC 29161-1435 FACILITY #:843-346-5272

BEARD, CATHERINE H PH#: 843-346-5272

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0082 / 04/30/2016 Florence / Sole Proprietorship

123 N WARREN ST

TIMMONSVILLE, SC 29161-1443

CATHERINE H BEARD

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 3

> Staff Beds: 1 Staff Rooms: 1 Other Beds: 0

0 Other Rooms:

**BEARD'S RESIDENTIAL CARE FACILITY #3** 

201 N BROCKINGTON ST

TIMMONSVILLE, SC 29161-1503 FACILITY #:843-346-5272

BEARD JR, JAMES PH#: 843-346-5272 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

CRC-1209 / 05/31/2016

Charleston / Ltd. Liability

1155 MARQUIS RD

CATHERINE H BEARD

CRC-0331 / 12/31/2015

Florence / Sole Proprietorship

TIMMONSVILLE, SC 29161-1503

201 N BROCKINGTON ST

**Resident Beds:** 8 Resident Rooms: 3 Staff Beds: 1 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

BELL'S PROFESSIONAL RESIDENTIAL HOME CARE

1910 DALTON ST

Alzheimer Care: No

CHARLESTON, SC 29406-3961 FACILITY #:843-744-1765

BELL, TROY A PH#: 843-744-1765

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 Total Number of Licensed Beds 20

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 20 **Resident Rooms:** 8

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

FKP SENECA SENIOR LIVING TENANT LLC

NORTH CHARLESTON, SC 29405-4353

BELL'S PROFESSIONAL RESIDENTIAL HOME CARE LLC

BELVEDERE COMMONS OF SENECA

515 BENTON ST

SENECA, SC 29672-6883 FACILITY #:864-888-4114

BROOM, BARBARA B PH#: 864-888-4114

Facility Email: BBROOM@BELVEDERECOMMONSSENECA.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 62

SENECA, SC 29672-6883

CRC-1466 / 11/30/2015

Oconee / Ltd. Liability

515 BENTON ST

Alzheimer Care: Yes Max # Residents: 30

Alzheimer Unit: Yes Max # Beds: 21 Resident Beds: 62 **Resident Rooms:** 47 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1509 / 09/30/2015

Spartanburg / State

195 BURDETTE ST

CHARLES LEA CENTER

**BENCHMARK HOMES - SPARTANBURG** 

450 W HENRY ST

SPARTANBURG, SC 29306-6037 FACILITY #:864-585-0322

MASON, SUZAN B PH#:

KLIBBY@CHARLESLEA.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

Total Number of Licensed Beds: 12

CRC-1541 / 03/31/2016

**BLUFFTON SLP LLC** 

Beaufort / Limited Liability

Resident Beds: 12 Resident Rooms: Staff Beds: 0 Staff Rooms:

SPARTANBURG, SC 29307-1003

Other Beds:

0 Other Rooms: 0 0

12

BENTON HOUSE OF BLUFFTON

8 HAMPTON LAKE DR

BLUFFTON, SC 29910-9568 FACILITY #:678-297-0388

WINTERS, DAVID C PH#: 678-297-0388

Facility Email: DWINTERS@PRINCIPALSENIORLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 0

Alzheimer Unit: Yes Max # Beds: 22 **Total Number of Licensed Beds** 72

Resident Beds: 72 Resident Rooms: 59 Staff Beds: 0 Staff Rooms: 0

Other Beds:

0

Other Rooms:

0

BETHEA BAPTIST ASSISTED LIVING

157 HOME AVE

DARLINGTON, SC 29532-7625 FACILITY #:843-393-2867

SPURLING, BENJAMIN S PH#: 843-393-2867

Facility Email: BSPURLING@SCBMA.COM

Fac. Cont. Email: BSPURLING@SCBMA.COM

CRC-1533 / 08/31/2016

Darlington / Non-Profit Corporation

157 HOME AVE

DARLINGTON, SC 29532-7625

SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** 14

Resident Beds: 14 Resident Rooms: 12 Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

BIRD STREET I COMMUNITY RESIDENTIAL CARE FACILITY

1705 BIRD ST

ROCK HILL, SC 29730-3830 FACILITY #:803-628-5999

MCKNIGHT, SHARON PH#: 803-366-7121

MPOOLE@YORKDSNB.ORG Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0 Max # Beds: 0

CRC-1357 / 06/30/2016

York / PO BOX 59

YORK, SC 29745-0059

YORK COUNTY DISIBILITIES AND SPECIAL NEEDS BOARD

**Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 8 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1358 / 06/30/2016

York /

BIRD STREET II COMMUNITY RESIDENTIAL CARE FACILITY

1711 BIRD ST

ROCK HILL, SC 29730-3830 FACILITY #:803-628-5999

Facility Email:

MCKNIGHT, SHARON PH#: 803-366-6113 MPOOLE@YORKDSNB.ORG

Fac. Cont. Email: SMCKNIGHT@YORKDSNB.ORG

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** R

**Resident Beds:** 8 Resident Rooms: 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY

1 BISHOP GADSDEN WAY

CHARLESTON, SC 29412-3577 FACILITY #:843-762-3300

TRAWICK, C WILLIAM PH#: 843-762-3300

Facility Email: BILL.TRAWICK@BISHOPGADSDEN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 20

Alzheimer Unit: Yes Max # Beds: 20 CRC-0451 / 11/30/2015

Charleston / Non-Profit Corporation

1 GADSDEN WAY

CHARLESTON, SC 29412

BISHOP GADSDEN EPISCOPAL RETIREMENT COMMUNITY

YORK COUNTY DISIBILITIES AND SPECIAL NEEDS BOARD

**Total Number of Licensed Beds: 112** 

Resident Beds: 112 Resident Rooms: 112 Staff Beds: Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**BISHOPVILLE MANOR** 

2779 HWY 15 N

BISHOPVILLE, SC 29010-7101 FACILITY #:803-428-2222

GOLDEN, IDA M PH#:

Facility Email: RICKIE.TILLEA@CTP-CPA.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1108 / 06/30/2015 (Renewal Pending)

Lee / Corporation PO BOX 312

BISHOPVILLE, SC 29010-0312 BISHOPVILLE MANOR INC

Total Number of Licensed Beds: 44

Resident Beds: 44 **Resident Rooms:** 14 Staff Beds: 0 Staff Rooms: 0

Other Beds: Other Rooms: 0

**BLACK'S DRIVE COMMUNITY RESIDENCE** 

160 BLACKS DR

WILLISTON, SC 29853-3558 FACILITY #:803-259-7472

SISK, DARRIN W PH#: 803-259-7472

BJONES@BARNWELLSC.COM Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0 Max # Beds: 0

CRC-1524 / 08/31/2016

Aiken / County

ALLENDALE/BARNWELL COUNTIES DISABILITIES AND SPECIAL

0

**NEEDS BOARD** 

**Total Number of Licensed Beds**: 8

Resident Beds: 8 **Resident Rooms:** 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1510 / 12/31/2015

3 HARVEST LN

Beaufort / Limited Liability

BEAUFORT, SC 29907-2042

BLOOMFIELD SENIOR LIVING OF BLUFFTON LLC

BLOOMFIELD SENIOR LIVING OF BLUFFTON II LLC

**BLOOM AT BELFAIR** 

60 OAK FOREST RD

BLUFFTON, SC 29910-5010 FACILITY #:843-815-2338

EADS, JEFFREY A PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Alzheimer Unit: Yes

Max # Residents: 23

Max # Beds: 23

Total Number of Licensed Beds 68

Resident Beds: 68 Resident Rooms: Staff Beds: 0 Other Beds: 0

CRC-1381 / 04/30/2016

Staff Rooms: 0 Other Rooms: 0

**BLOOM AT BLUFFTON** 

800 FORDING ISLAND RD

BLUFFTON, SC 29910-4845 FACILITY #:843-815-2555

EADS, JEFF PH#: 843-815-2555

Facility Email: ADMIN@BLOOMATBLUFFTON.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 10

Alzheimer Unit: Yes Max # Beds: 24 **Total Number of Licensed Beds** 70

Resident Beds: 70 Staff Beds:

Beaufort /

Beaufort /

0 Other Beds: 0

CRC-1382 / 04/30/2016

Resident Rooms: 62 **Staff Rooms:** 0 0

Other Rooms:

**BLOOM AT HILTON HEAD** 

35 BEACH CITY RD

HILTON HEAD ISLAND, SC 29926-4725 FACILITY #:843-342-5599

TITUS-CONEY, LESLIE A PH#: 843-342-5599

Facility Email: ADMIN@BLOOMATHILTONHEAD.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Max # Residents: 42

Alzheimer Unit: Yes Max # Beds: 30

MILWAUKEE, WI 53214-5650

6737 W WASHINGTON ST STE 2300

**Total Number of Licensed Beds** 72 Resident Beds: 72 Resident Rooms: 57 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

BLOOMFIELD SENIOR LIVING OF HILTON HEAD LLC

**BOSTICK'S ADULT RESIDENTIAL CARE FACILITY** 

1912 DUKE ST

BEAUFORT, SC 29902-4404 FACILITY #:843-524-3906

BURNS, WANDA BOSTICK PH#: 843-524-3906

BARCF1@GMAIL.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds 20

WANDA BOSTRICK BURNS

CRC-0143 / 05/31/2016

PO BOX 1841

Beaufort / Sole Proprietorship

BEAUFORT, SC 29901-1841

Resident Beds: 20 Resident Rooms: Staff Beds: 2 Other Beds: 0

Staff Rooms: 2 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0090 / 09/30/2015

9270 N HWY 17

BENJAMIN, BOWLES

Charleston / Sole Proprietorship

MC CLELLANVILLE, SC 29458-9422

**BOWLES COMMUNITY CARE HOME** 

9270 N HWY 17

MC CLELLANVILLE, SC 29458-9422 FACILITY #:843-887-4180

BOWLES, BENJAMIN PH#: 843-887-4180

Facility Email:

BBOWCARE@AOL.COM

Fac. Cont. Email: BBOWCARE@AOL.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 16

Resident Beds: 16 Resident Rooms: 7 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**BOWLES COMMUNITY CARE HOME 2** 

9274 N HWY 17

MCCLELLANVILLE, SC 29458-9422 FACILITY #:843-887-4180

BOWLES, BENJAMIN PH#: 843-887-4180

Facility Email: BBOWCARE@AOL.COM

Fac. Cont. Email: BBOWCARE@AOL.COM

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1497 / 11/30/2015

Charleston / Sole Proprietorship

9270 N HWY 17

MC CLELLANVILLE, SC 29458-9422

BOWLES, BENJAMIN

**Total Number of Licensed Beds** 

**Resident Beds:** 5 Resident Rooms: 3 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

**BRIAN'S RESIDENTIAL CARE** 

1115 WHITMAN ST

ORANGEBURG, SC 29115-6150 FACILITY #:803-533-1588

STOKES, ALBERT O PH#: 803-533-1588 Facility Email: ASTOKES@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Orangeburg / Partnership 1027 BERKELEY DR

CRC-0418 / 02/28/2016

ORANGEBURG, SC 29118-8356

ALBERT STOKES AND DELAURA STOKES

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 7

Resident Beds: 7 Resident Rooms: 3

Staff Beds: 1 Staff Rooms: 1 Other Beds: Other Rooms: 0 0

**BRIAN'S RESIDENTIAL CARE II** 

4003 CALHOUN ST

BRANCHVILLE, SC 29432-2243 FACILITY #:803-274-8051

STOKES, DELAURA PH#: 803-274-8051 Facility Email: STOKES411@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 1

Alzheimer Unit: No Max # Beds: 0 CRC-0947 / 09/30/2015 Orangeburg / Partnership 1027 BERKELEY DR

ORANGEBURG, SC 29118-8356 ALBERT STOKES AND DELAURA STOKES

Total Number of Licensed Beds 20

Resident Beds: 20 Resident Rooms: 11 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1333 / 11/30/2015

649 HAMPTON AVE N

JOHN W WALKER

FAIRFAX, SC 29827-4313

Allendale / Sole Proprietorship

**BRIANA'S RESIDENTIAL CARE FACILITY** 

252 CHARLESTON AVE N

FAIRFAX, SC 29827-4502 FACILITY #:803-632-9813

JENKINS, GENORA W PH#: 803-632-9813

Facility Email: No Facility Email on Record

Alzheimer Care: No

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

Total Number of Licensed Beds 10

CRC-1064 / 10/31/2015

Charleston / Ltd. Liability

3570 KEITH ST NW

Resident Beds: 10 Resident Rooms: Staff Beds: 0 Staff Rooms:

Other Beds: 0

Other Rooms:

CHARLESTON RETIREMENT INVESTORS LLC

0 0

5

65

BRIDGE ASSISTED LIVING AT LIFE CARE CENTER OF CHARLESTON

2590 ELMS PLANTATION BLVD

NORTH CHARLESTON, SC 29406-8105 FACILITY #:843-553-6342

NELSON, MICHELLE M PH#: 843-553-6342

Facility Email: MNELSON@CENTURYPA.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 100

CLEVELAND, TN 37312-4309

Resident Beds: 100 Staff Beds:

Resident Rooms: Staff Rooms: 0

Other Beds: 0

Other Rooms: 0

**BRIGHTWATER ASSISTED LIVING** 

201 BRIGHTWATER DR

MYRTLE BEACH, SC 29579-8298 FACILITY #:843-903-8940

TREMBLE, WILLIAM MARCEL PH#: 843-903-8300 Facility Email: JJUSTICE@BRIGHTWATER-LIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1489 / 04/30/2016 Horry / Limited Liability

201 BRIGHTWATER DR

MYRTLE BEACH, SC 29579-8298 BRIGHTWATER RETIREMENT LLC

Alzheimer Care: Yes

Max # Residents: 0

Alzheimer Unit: Yes Max # Beds: 24 **Total Number of Licensed Beds** 56

Resident Beds: 56 Resident Rooms: 48

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**BROAD CREEK CARE CENTER ASSISTED LIVING** 

801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928-3022 FACILITY #:843-341-7300

JOHNSON, STEPHANI PH#: 843-341-7300

SJOHNSON@VILIVING.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 50

Alzheimer Unit: No Max # Beds: 0 CRC-1036 / 07/31/2016

Beaufort / Corporation 801 LEMON GRASS CT

HILTON HEAD ISLAND, SC 29928-3022

CC-HILTON HEAD INC

Total Number of Licensed Beds 50

Resident Beds: 50 Staff Beds: 0

Resident Rooms: Staff Rooms: Other Rooms:

50

0

0

Other Beds: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1302 / 06/30/2016

3961 FISH HATCHERY RD

GASTON, SC 29053-9038

CRC-1204 / 12/31/2015

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

**EMERITUS CORPORATION** 

CRC-1306 / 12/31/2015

Greenville / Corporation

2010 BRUSHY CREEK RD

GREER, SC 29650-2614

CRC-1307 / 12/31/2015

CENTRAL, SC 29630-8330

Pickens / Corporation

131 VICKERY DR

Horry / Corporation

Lexington / State

(LCCMHC)

**BROOK PINE COMMUNITY RESIDENTIAL CARE FACILITY** 

3961 FISH HATCHERY RD

GASTON, SC 29053-9038 FACILITY #:803-955-3821

MURPHY, LAVERNE PH#: 803-955-3821

Facility Email: LMD60@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 16

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 16 Resident Rooms: 11

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LEXINGTON COUNTY COMMUNITY MENTAL HEALTH CENTER

**BROOKDALE AT CONWAY** 

872 SINGLETON RIDGE RD

CONWAY, SC 29526-9166 FACILITY #:843-347-3050

BUNTING, ROBIN E PH#: 843-347-3050

Facility Email: CONWAYPLACE-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42 0

Staff Beds: Staff Rooms: Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

**BROOKDALE BRUSHY CREEK** 

2010 BRUSHY CREEK RD

GREER, SC 29650-2614 FACILITY #:864-244-9994

CARRION, MARY M PH#: 864-886-0070

Facility Email: SHGREENVILLESC@BROOKDALELIVING.COM

Fac. Cont. Email: MCARRYON@AOL.COM

Alzheimer Care: Yes Max # Residents: 52 **Total Number of Licensed Beds** 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

**BROOKDALE CENTRAL** 

131 VICKERY DR

CENTRAL, SC 29630-8330 FACILITY #:864-653-4676

HAMMOND, ANGELA PH#: 864-653-4674 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1291 / 09/30/2015

HBP LEASECO LLC

Charleston / Limited Liability

2030 CHARLIE HALL BLVD CHARLESTON, SC 29414-5830

**BROOKDALE CHARLESTON** 

2030 CHARLIE HALL BLVD

Alzheimer Care: Yes

Alzheimer Unit: Yes

CHARLESTON, SC 29414-5830 FACILITY #:843-763-4055

Max # Residents: 29

ROBINSON, TERRI L PH#: 843-763-4055

Facility Email: TROBINSON1@BROOKDALE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds: 100

CRC-1398 / 07/31/2016

Greenville / Ltd. Liability

GREENVILLE, SC 29601-3110

ARC CLEVELAND PARK LLC

CRC-1310 / 12/31/2015

Richland / Corporation

251 SPRINGTREE DR

CRC-1308 / 02/29/2016

York / Corporation

1920 EBENEZER RD

ROCK HILL, SC 29732-1014

Total Number of Licensed Beds 52

COLUMBIA, SC 29223-7989

12 BOYCE AVE

Max # Beds: 33 Resident Beds: 100 Resident Rooms: 84

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BROOKDALE CLEVELAND PARK

12 BOYCE AVE

GREENVILLE, SC 29601-3110 FACILITY #:864-250-1188

KRUGER, JESSICA L PH#: 864-223-2281

Facility Email: MQUINNT@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 17 **Total Number of Licensed Beds** 115

Alzheimer Unit: Yes Max # Beds: 17 Resident Beds: 115 Resident Rooms: 92 Staff Beds: Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**BROOKDALE COLUMBIA** 

251 SPRINGTREE DR

COLUMBIA, SC 29223-7989 FACILITY #:803-741-2600

SHULL, BRIAN D PH#: 803-936-0062

Facility Email: SHPARKLANE@BROOKDALELIVING

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 42 **Total Number of Licensed Beds** 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

**BROOKDALE EBENEZER ROAD** 

1920 EBENEZER RD

ROCK HILL, SC 29732-1014 FACILITY #:803-366-1189

BRAKEFIELD-MARZILLI, MARY L PH#:

No Facility Email on Record Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 52

Alzheimer Unit: No Max # Beds: 0

Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

Florence / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032 **EMERITUS CORPORATION** 

**BROOKDALE FLORENCE** 

1938 MOUNTAIN LAUREL CT

FLORENCE, SC 29505-6084 FACILITY #:843-665-7978

OWENS, ALICIA B PH#: 843-665-7978 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 13

Alzheimer Unit: Yes Max # Beds: 13 Total Number of Licensed Beds 90

Resident Beds: 90 Resident Rooms: 71 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CRC-1387 / 08/31/2015 (Renewal Pending)

**BROOKDALE GREENVILLE** 

1306 PELHAM RD OFC

GREENVILLE, SC 29615-3661 FACILITY #:864-286-6600

HUNTER, ANDREA M PH#: 864-582-6838

Facility Email: GREENVILLE-ED@EMERITUS.COM Fac. Cont. Email: ANDERSONPLACE-ED@EMERITUS.COM

**Alzheimer Care: Yes** Max # Residents: 25

Alzheimer Unit: Yes Max # Beds: 26 CRC-1140 / 10/31/2015

Greenville / Corporation 3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032 **EMERITUS CORPORATION** 

CRC-1309 / 12/31/2015

Greenwood / Corporation

GREENWOOD, SC 29646-4043

**Total Number of Licensed Beds** 119

Resident Beds: 119 **Resident Rooms:** 82 Staff Beds: **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

**BROOKDALE GREENWOOD** 

Alzheimer Care: Yes

1408 PKWY RD

GREENWOOD, SC 29646-4043 FACILITY #:864-223-2281

PH#:

Facility Email: SHGREENWOOD@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 52 **Total Number of Licensed Beds** 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 44

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

1408 PKWY

**BROOKDALE HAWTHORNE PARK** 

20 HAWTHORNE PARK CT

GREENVILLE, SC 29615-3194 FACILITY #:864-288-6775

THOMAS, AMY S PH#: 864-591-1116

Facility Email: AMY.THOMAS@BROOKDALE.COM Fac. Cont. Email: AMY.THOMAS@BROOKDALE.COM

Alzheimer Care: Yes Max # Residents: 17

Alzheimer Unit: Yes Max # Beds: 17 CRC-1396 / 08/31/2015 (Renewal Pending)

Greenville / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032 **EMERITUS CORPORATION** 

Total Number of Licensed Beds 68

Resident Beds: 68 Resident Rooms: 52 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**BROOKDALE HILTON HEAD COURT** 

CRC-1275 / 08/31/2015 (Renewal Pending)

48 MAIN ST

Beaufort / Corporation HILTON HEAD ISLAND, SC 29926-1647 FACILITY #:843-342-7122

3131 ELLIOTT AVE STE 500

JORDAN, ALAN PH#: 803-741-2600

SEATTLE, WA 98121-1032

Facility Email:

PALMMEADOWSCOURT-ED@EMERITUS.COM

**EMERITUS CORPORATION** 

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 36

Alzheimer Care: Yes Alzheimer Unit: Yes

Max # Residents: 36 Max # Beds: 36

Resident Beds: 36

Resident Rooms: 32 0

Staff Beds:

0

Staff Rooms: 0

Other Beds:

0

Other Rooms:

**BROOKDALE HILTON HEAD COURT** 

CRC-1392 / 08/31/2015 (Renewal Pending)

48 MAIN ST

Facility Email:

Beaufort / Corporation

HILTON HEAD ISLAND, SC 29926-1647 FACILITY #:843-342-7122

3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032

PATTERSON, AMANDA J PH#:

PALMMEADOWSCOURT-ED@EMERITUS.COM **EMERITUS CORPORATION** 

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 92

**Alzheimer Care: Yes** Alzheimer Unit: Yes

Max # Beds: 20

Max # Residents: 20

Resident Beds: 92 Staff Beds: 0

Resident Rooms: 52 **Staff Rooms:** 0

Other Beds:

0

Other Rooms:

**BROOKDALE HILTON HEAD VILLAGE** 

CRC-1276 / 08/31/2015 (Renewal Pending)

80 MAIN ST OFC 100

Beaufort / Corporation

HILTON HEAD ISLAND, SC 29926-2923 FACILITY #:843-689-9143 HERNDON, ADAM W PH#:

3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032

Facility Email: PALMVILLAGE-ED@EMERITUS.COM

**EMERITUS CORPORATION** 

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 52

Alzheimer Care: No Alzheimer Unit: No

Max # Beds: 0

Max # Residents: 0

Resident Beds: 52 Resident Rooms:

Staff Beds:

0

Staff Rooms: 0

Other Beds:

0

Other Rooms:

0

42

0

**BROOKDALE LEXINGTON** 

190 MCSWAIN DR

Lexington / Corporation

WEST COLUMBIA, SC 29169-4825 FACILITY #:803-936-0062

PEPPER, CHRIS PH#:

3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032

Facility Email:

LEXINGTONGARDENS-ED@EMERITUS.COM

**EMERITUS CORPORATION** 

CRC-1386 / 08/31/2016

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 90

Alzheimer Care: No Alzheimer Unit: No

September 4, 2015

Max # Beds: 0

Max # Residents: 0

90 Resident Beds:

Resident Rooms: 70 0

Staff Beds: Other Beds:

0 0 Staff Rooms: Other Rooms:

0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1298 / 02/29/2016

Aiken / Corporation

105 N HILLS DR OFC

CRC-1335 / 09/30/2015

Greenville / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

**EMERITUS CORPORATION** 

CRC-1312 / 12/31/2015

1180 WILSON HALL RD

CRC-0879 / 09/30/2015

BABCOCK CENTER INC

Lexington / Non-Profit Corporation

PO BOX 4389, BABCOCK CENTER INC WEST COLUMBIA, SC 29171-4389

SUMTER, SC 29150-1738

Sumter / Corporation

**BROOKDALE NORTH AUGUSTA** 

105 N HILLS DR OFC

NORTH AUGUSTA, SC 29841-0113 FACILITY #:803-819-0034

LARKE, ANGELA CORBIN PH#: 803-819-0034

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 52 Total Number of Licensed Beds 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

NORTH AUGUSTA, SC 29841-0113

**BROOKDALE SOUTHPOINTE DRIVE** 

23 SOUTHPOINTE DR

Alzheimer Care: Yes

GREENVILLE, SC 29607-5956 FACILITY #:864-675-0220

DOUGLAS, LES PH#: 864-675-0220

Facility Email: BELLAIREPLACE-ED@EMERITUSCOM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 10

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds: 162** 

Resident Beds: 162 **Resident Rooms:** 82 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

**BROOKDALE SUMTER** 

1180 WILSON HALL RD OFC

SUMTER, SC 29150-1741 FACILITY #:803-212-0029

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 52 Alzheimer Care: Yes **Total Number of Licensed Beds** 52

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**BROOKWOOD COMMUNITY RESIDENCE** 

181 BROOKWOOD DR

BATESBURG, SC 29006-2324 FACILITY #:803-532-4440

RUFF JR, MURRY J PH#: 803-532-4440

JRUFF@BABCOCKCENTER.ORG Facility Email:

Fac. Cont. Email: MGARRISON@BABCOCKCENTER.ORG

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8 0

Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**BTU REST HOME** 113 ELLISON ST

BENNETTSVILLE, SC 29512-0352 FACILITY #:843-479-9053

CAIN, MICHAEL PH#: 843-479-9053

Facility Email: BTURESTHOME@AOL.COM

Fac. Cont. Email: MICHAELCAIN94@AOL.COM

CRC-0235 / 09/30/2015 Marlboro / Corporation

PO BOX 352

BENNETTSVILLE, SC 29512-0352

BTU REST HOME INC

CRC-1491 / 04/30/2016

731 SIMS AVE

PO BOX 6023

SANDY BURGESS

726 BARTON RD

MARY ANN FIELDS

Richland / Non-Profit Corporation

ALDERSGATE SPECIAL NEEDS MINISTRY

COLUMBIA, SC 29205-1837

Florence / Sole Proprietorship

FLORENCE, SC 29502-6023

Allendale / Sole Proprietorship

ALLENDALE, SC 29810-5010

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 80

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 80 Resident Rooms: 35

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**BUILDERS CARE HOME** 

731 SIMS AVE

COLUMBIA, SC 29205-1837 FACILITY #:803-376-8991

PH#:

Facility Email: COLUMBIAHOMECARE73@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds** 

**Resident Beds:** 6 Resident Rooms: 6 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

CRC-0925 / 04/30/2015 (Renewal Pending)

**BURGESS RESIDENTIAL CARE FACILITY** 

2591 S BREHENAN DR

FLORENCE, SC 29505-6203 FACILITY #:843-665-6843

BURGESS, SANDY M PH#: 843-665-6843

Facility Email: SANDYBURGESS98@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** q

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 9 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CRC-1220 / 08/31/2015 (Renewal Pending)

C & S ASSISTED LIVING

726 BARTON RD

ALLENDALE, SC 29810-5010 FACILITY #:803-584-5090

HAMILTON, DA'ASIA S PH#: 803-943-7177

Facility Email: CSASSISTEDLIVINGHOME@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 2

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

8

#### **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

Total Number of Licensed Beds 18

CRC-0571 / 02/29/2016

**CABADING HOMES #1** 

CRC-0394 / 07/31/2016 3431 RIVERS AVE Charleston / Corporation NORTH CHARLESTON, SC 29405-7760 FACILITY #:843-747-3050 3431 RIVERS AVE

CABADING, LOLITA B PH#: 843-745-9182

NORTH CHARLESTON, SC 29405-7760

Facility Email: CABOOTY105@AOL.COM CABADING HOMES INC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 18 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**CABADING HOMES #2** 

3435 RIVERS AVE Charleston / Corporation 2149 DORCHESTER RD

NORTH CHARLESTON, SC 29405-7760 FACILITY #:843-745-9182

CABADING, LOLITA B PH#: 843-745-9182 NORTH CHARLESTON, SC 29405-7763

Facility Email: CABOOTY105@AOL.COM CABADING HOMES INC

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 15

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 15 Resident Rooms: 7

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**CABADING HOMES #3** 

CRC-0825 / 07/31/2016 2149 DORCHESTER RD Charleston / Corporation NORTH CHARLESTON, SC 29405-7763 FACILITY #:843-745-9182 2149 DORCHESTER RD

CABADING, ALLAN M PH#: 843-745-9182 NORTH CHARLESTON, SC 29405-7763

Facility Email: CABOOTY105@AOL.COM CABADING HOMES INC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 25

Alzheimer Unit: No Max # Beds: 0 25 Resident Beds: Resident Rooms: 13

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**CAMDENI** 

CRC-1525 / 09/30/2015 975 WATEREE BLVD Kershaw / County

CAMDEN, SC 29020-4134 FACILITY #:803-432-0973

WRIGHT, CRYSTAL J PH#: 803-432-1345

S.TURNER@CHESCOSERVICES.ORG Facility Email: CHESCO SERVICES

Fac. Cont. Email: CCBDSN@INFOAVE.NET

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1522 / 05/31/2016

Kershaw / County

**CAMDEN II** 

975 WATEREE BLVD

Alzheimer Care: No

CAMDEN, SC 29020-4134 FACILITY #:803-432-1345

WRIGHT, CRYSTAL J PH#: 803-432-1345

Facility Email: S.TURNER@CHESCOSERVICES.ORG

Fac. Cont. Email: CCBDSN@INFOAVE.NET

CHESCO SERVICES

CRC-1371 / 01/31/2016

Charleston / State

975 WATEREE BLVD

CAMDEN, SC 29020-4134

Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CAMP COMMUNITY RESIDENCE

1251 CAMP RD

JAMES ISLAND, SC 29412-9212 FACILITY #:843-805-5820

SIMMONS, CYNTHIA Y PH#: 843-762-9827

Facility Email: No Facility Email on Record

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

Max # Residents: 0 **Alzheimer Care: No** 

Max # Beds: 0 Alzheimer Unit: No

**Total Number of Licensed Beds** 

CHARLESTON, SC 29413-2708

**Resident Beds:** 8 Resident Rooms: 8 Staff Beds: 0 **Staff Rooms:** 0

DISABILITIES BOARD OF CHARLESTON COUNTY

Other Beds: 0 Other Rooms: 0

**CANTRELL'S RESIDENTIAL CARE FACILITY** 

124 GLADYS CT

SPARTANBURG, SC 29301-3701 FACILITY #:864-587-1993

WALKER, LINDA C PH#: 864-587-1993

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: LCWALKER428@YAHOO.COM

CRC-1105 / 06/30/2016 Spartanburg / Corporation

CRC-1499 / 11/30/2015

124 GLADYS CT

SPARTANBURG, SC 29301-3701

CANTRELL'S RESIDENTIAL CARE FACILITY INC

Alzheimer Care: Yes Max # Residents: 22 **Total Number of Licensed Beds** 22

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 22 Resident Rooms: 10

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**CARE WITH LOVE** 

3408 LENAPE ST Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-7777 FACILITY #:843-744-0313 2240 DOVER ST

DORSCHER-MCCORMACK, DEBORAH PH#: NORTH CHARLESTON, SC 29405-7939

CAREWITHLOVE@ATT.NET NELSON, TIFFANY Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 Resident Rooms: **Resident Beds:** 5 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**CARE WITH LOVE II** 

CRC-1523 / 08/31/2015 (Renewal Pending)

2109 COMMANDER RD

Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-7704 FACILITY #:843-744-0313

DORSCHER-MCCORMACK, DEBORAH PH#:

Facility Email: CAREWITHLOVE@ATT.NET NELSON, TIFFANY

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 5

> Staff Beds: 1 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CARLISLE PLACE

CRC-1538 / 12/31/2015

CRC-1258 / 01/31/2016

21 FRANK PRESSLY DR

Abbeville /

DUE WEST, SC 29639-9705 FACILITY #:864-379-2570

SHERARD, STEPHEN F PH#:

Facility Email: SSHERARD28@AOL.COM THE RENAISSANCE LLC

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 28

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 28 Resident Rooms: 22

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**CAROLINA PLACE** 

240 CHARLES ST

Florence / State

LAKE CITY, SC 29560-2161 FACILITY #:843-394-5707 1211 E NATIONAL CEMETERY RD

UWAGBAI, LINDA G PH#: 843-394-5707 FLORENCE, SC 29506-3240 Facility Email: LUWAGBAI@FCDSN.ORG FLORENCE COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

**CAROLINIAN** 

718 S DARGAN ST

FLORENCE, SC 29506-2559 FACILITY #:843-665-9314

WILCOX, KATHRYN D PH#: 843-665-9314 KATHRYN.WILCOX@RHF.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 10

Alzheimer Unit: No Max # Beds: 0 CRC-0468 / 04/30/2016 Florence / Corporation 718 S DARGAN ST

FLORENCE, SC 29506-2559 FLORENCE RHF HOUSING INC

Total Number of Licensed Beds 38

**Resident Beds:** 38 Resident Rooms: 38 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

**CARRIAGE HOUSE OF SUMTER** 

431 N MAIN ST

SUMTER, SC 29150-4232 FACILITY #:803-773-0965

MCALISTER, DELISA C PH#: 803-774-5700

Facility Email: CARRIAGEHOUSEOFSUMTER@HOTMAIL.COM

Fac. Cont. Email: CLARDY@SC.RR.COM

CRC-0997 / 01/31/2016 Sumter / Corporation 431 N MAIN ST

CRC-0996 / 01/31/2016

CRC-0994 / 01/31/2016

CRC-0978 / 01/31/2016

Greenville / Corporation

TAYLORS, SC 29687-2951

402 W MAIN ST

Darlington /

Florence /

SUMTER, SC 29150-4232

CARRIAGE HOUSE OF SUMTER INC

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 60

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 60 Resident Rooms: 30

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIAGE HOUSE SENIOR LIVING OF FLORENCE

739 S PARKER DR

FLORENCE, SC 29501-6062 FACILITY #:843-661-6655

CARTER, TAMMY E PH#: 843-661-6655

Facility Email: GINGERCHF@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 80

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 80 Resident Rooms: 40

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIAGE SENIOR LIVING HOUSE OF FLORENCE INC

CARRIAGE HOUSE SENIOR LIVING OF HARTSVILLE INC

1131 E HOME AVE

HARTSVILLE, SC 29550 FACILITY #:843-383-6990

SCOTT, GWENDOLYN PH#: 843-382-3855

Facility Email: CHHARTSVILLE@ATT.NET CARRIAGE HOUSE SENIOR LIVING OF HARTSVILLE INC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 60

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 60 Resident Rooms: 30

Staff Beds:0Staff Rooms:0Other Beds:0Other Rooms:0

CARRIAGE HOUSE SENIOR LIVING OF TAYLORS

402 W MAIN ST

TAYLORS, SC 29687-2951 FACILITY #:864-292-2416

COLEMAN, ALLYE V PH#:

Facility Email: CHTAYLORS@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 24

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CARRIAGE HOUSE SENIOR LIVING OF TAYLORS INC

September 4, 2015 Page 24 of 118 hlcrc.rdf

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0916 / 02/29/2016

10219 FARROW RD

JAMES E CARSON

Richland / Sole Proprietorship

BLYTHEWOOD, SC 29016-9612

CARSON'S COMMUNITY CARE

10219 FARROW RD

BLYTHEWOOD, SC 29016-9612 FACILITY #:803-786-7513

CARSON, ANNIE P PH#: 803-786-7513

Facility Email: CARSONSCOMMUNITYCARE@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0064 / 04/30/2016

Charleston / Corporation

CRC-1490 / 04/30/2016

30 SPRINGCREST CT

CASCADES NURSING LLC

CRC-0701 / 01/31/2016

**PO BOX 121** 

MARY BRIGGS

Richland / Sole Proprietorship

STATE PARK, SC 29147-0121

Greenville / Limited Liability

GREENVILLE, SC 29607-4034

CHARLESTON, SC 29407-4242

1660 INGRAM RD

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 5

> Staff Beds: 1 Staff Rooms: 1 Other Rooms: 0

Other Beds: 0

CARTER-MAY HOME

1660 INGRAM RD

CHARLESTON, SC 29407-4242 FACILITY #:843-556-8314

BAUDER, JANINE NEWELL PH#: 843-556-8314

Facility Email: JANINE@CATHOLIC-DOC.ORG

Fac. Cont. Email: JANINE@CATHOLIC-DOC.ORG

Alzheimer Care: Yes Max # Residents: 2 Total Number of Licensed Beds 25

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 25 Resident Rooms: 23 0 0

Staff Beds: **Staff Rooms:** Other Beds: 0 Other Rooms: 0

CATHOLIC CHARITIES OF THE DIOCESE OF CHARLESTON INC

CASCADES VERDAE ASSISTED LIVING

30 SPRINGCREST CT

GREENVILLE, SC 29607-4034 FACILITY #:864-528-5501

KEEGAN, CARI LYNN PH#: 864-943-1933 Facility Email: THECASCADESVERDAE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 13 Total Number of Licensed Beds 92

Alzheimer Unit: Yes Max # Beds: 24 92 Resident Beds: Resident Rooms: 72

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

CASUAL COMMUNITY CARE HOME

112 GOODRICH ST

COLUMBIA, SC 29223-7725 FACILITY #:803-788-2721

BRIGGS, MARY E PH#: 803-788-2721

Facility Email: MARYBRIGGS1@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 **Resident Rooms:** 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CATHERINE'S MANOR II

261 SUMMERS AVE

ORANGEBURG, SC 29115-5421 FACILITY #:803-539-0899

CARR JR, GUSS PH#: 803-539-0899

Facility Email: EVERNECARR12@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1033 / 08/31/2016

Orangeburg / Sole Proprietorship

261 SUMMERS AVE

ORANGEBURG, SC 29115-5421

**CATHERINE CARR** 

Alzheimer Care: Yes Max # Residents: 5 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 3

> Staff Beds: 1 Staff Rooms: 1 Other Beds: 0

0 Other Rooms:

CHARDON PLACE

3455 BOHICKET RD

JOHNS ISLAND, SC 29455-7222 FACILITY #:843-768-4948

KULSICAVAGE, ANNA MARIE PH#: 843-768-4948

Facility Email: DAVESWILLIS@GMAIL.COM Fac. Cont. Email: DSWILLIS@YAHOO.COM

Alzheimer Care: Yes

Max # Residents: 4

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 16

CHARDON PROPERTY LLC

CRC-1462 / 01/31/2016

Charleston / Ltd. Liability

JOHNS ISLAND, SC 29455-7222

3455 BOHICKET RD

**Resident Beds:** 16 Resident Rooms: 16 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

CHARLES M INGRAM SR COMMUNITY RESIDENCE

1615 STATE RD

CHERAW, SC 29520-5107 FACILITY #:843-623-9016

PETERKIN, MARGARETE PH#: 843-623-9016

Facility Email: M.PETERKIN@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1440 / 05/31/2016 Chesterfield / County

1615 STATE RD

CHERAW, SC 29520-5107

CHESCO SERVICES

Alzheimer Care: No

Max # Residents: 0

Max # Residents: 3

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** R

CRC-0729 / 09/30/2016

1434 N LIMESTONE ST GAFFNEY, SC 29340-4798

Cherokee / County

Resident Beds: 8 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

CHEROKEE COUNTY COMMUNITY RESIDENTIAL CARE FACILITY

1434 N LIMESTONE ST

Alzheimer Care: Yes

GAFFNEY, SC 29340-4798 FACILITY #:864-487-2717

MATTHEWS, CINDY F PH#: 864-487-2717

CINDYMATTHEWSPTC@BELLSOUTH.NET Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 28

CHEROKEE COUNTY COUNCIL

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 28 Resident Rooms: 15

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CHESTERFIELD COMMUNITY RESIDENCE

817 E MAIN ST

CHESTERFIELD, SC 29709-1807 FACILITY #:843-623-6586

PETERKIN, MARGARETE PH#: 843-623-9016

Facility Email: M.PETERKIN@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1441 / 05/31/2016 Chesterfield / County 817 E MAIN ST

CHESTERFIELD, SC 29709-0151

CHESCO SERVICES

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 4

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 0

Other Rooms:

**CLARKE HOUSE** 

919 SHILOH RD

SALUDA, SC 29138-8101 FACILITY #:864-445-8816

CLARKE, IDORA H PH#: 864-445-8816

Facility Email: THECLARKEHOUSE@EMBARQMAIL.COM

Max # Residents: 1

Max # Residents: 0

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 18

CRC-1154 / 05/30/2016

Pickens / Corporation

500 DOWNS LOOP

**CARC INC** 

CRC-0485 / 07/31/2016

919 SHILOH RD

**IDORA H CLARKE** 

Saluda / Sole Proprietorship

SALUDA, SC 29138-8101

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 18 Resident Rooms: 6

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**CLEMSON DOWNS ASSISTED LIVING** 

500 DOWNS LOOP

Alzheimer Care: Yes

Alzheimer Care: Yes

CLEMSON, SC 29631-2099 FACILITY #:864-654-1155

LEHEUP, JOHN D PH#: 864-654-1155

Facility Email: WANDAPALMER@CLEMSONDOWNS.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 56

CRC-1200 / 06/30/2016

**CORA SCOTT** 

Richland / Sole Proprietorship

GADSDEN, SC 29052-9789

1024 TUCKER TOWN RD STE 1024A

CLEMSON, SC 29631-2099

Alzheimer Unit: Yes Max # Beds: 32 56 Resident Beds: Resident Rooms: 20

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**CLS CARE HOME** 

Alzheimer Care: No

1024 TUCKER TOWN RD STE 1024A

GADSDEN, SC 29052-9789 FACILITY #:803-353-2151

SPEARMAN, HELEN D PH#: 803-353-2151 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 6 0

Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**COLLETON COURTYARD** 

Alzheimer Care: No

CRC-1484 / 12/31/2015

210 ACADEMY RD

WALTERBORO, SC 29488-9208 FACILITY #:843-538-8181

DOTTERY, VERNELL PH#: 843-538-8181

Facility Email: COLLETONCOURTYARD@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

LAKEFIELD PROPERTIES LLC

Max # Residents: 0 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Lexington /

PO BOX 820528

Colleton /

CRC-1542 / 03/31/2016

24

0

COLONIAL GARDENS ALZHEIMER'S SPECIAL CARE CENTER

3565 SUNSET BLVD

WEST COLUMBIA, SC 29169-3043 FACILITY #:803-822-4125

PH#:

Facility Email:

VANCOUVER, WA 98682-0011

CHRISTOPHER.PEPPER@JEASENIORLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 66

Alzheimer Unit: Yes Max # Beds: 66 **Total Number of Licensed Beds** 66

COLUMBIA CARE GROUP LLC

Resident Beds: 66 Resident Rooms: 46 Staff Beds: 0 Staff Rooms:

Other Beds: 0 Other Rooms:

**COMMUNITY RESIDENTIAL CARE FACILITY** 

703 BROAD ST

SUMTER, SC 29150-3309 FACILITY #:803-773-3443

MOORE, HARRIETT D PH#: 803-773-6525

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0613 / 12/31/2015

Sumter / Non-Profit Corporation

PO BOX 3818

SUMTER, SC 29151-3818

COMMUNITY INTERMEDIATE CARE FACILITY INC

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

Total Number of Licensed Beds 20

Resident Beds: 20 Resident Rooms: 16

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

COOPER HALL AT THE PALMS OF MT PLEASANT

CRC-1432 / 06/30/2016

937 BOWMAN RD OFC Charleston /

MOUNT PLEASANT, SC 29464-3222 FACILITY #:843-884-6949

GILLESPIE, CRIS J PH#: 843-884-6949

TCOOK@BELLPARTNERSINC.COM Facility Email: SNH SE SG TENANT LLC

Fac. Cont. Email: CJGILLESPIE@5SQC.COM

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 44

Resident Beds: 44 Resident Rooms:

42 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**COTTONWOOD VILLAS** 

CRC-1186 / 06/30/2016

800 W CHURCH ST

Lee /

BISHOPVILLE, SC 29010-1054 FACILITY #:803-484-5303

SHEALY, HARRIETT H PH#: 803-484-5303

Facility Email: FELICIAGAINEY@OUTLOOK.COM LAKEFIELD PROPERTIES LLC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Alzheimer Unit: No

Max # Residents: 3

Max # Beds: 0

Total Number of Licensed Beds: 71 Resident Beds: 71

Staff Beds:

Other Beds:

Resident Rooms:

Other Rooms:

43

0

0

Staff Rooms:

0 0

**COUNTRY CARE OF FAIR PLAY** 

207 FARM HOUSE LN

FAIR PLAY, SC 29643-2207 FACILITY #:864-972-1072

MOORE, PEGGY D PH#: 864-231-0059 Facility Email:

PEGMOORE2@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 14

Alzheimer Unit: Yes

Max # Beds: 14

CRC-1041 / 04/30/2016

Oconee / Limited Liability 207 FARM HOUSE LN

FAIR PLAY, SC 29643-2207

CCC OF FAIR PLAY LLC

**Total Number of Licensed Beds** 14

**Resident Beds:** 14

0

Resident Rooms: 11

Staff Beds: 0 **Staff Rooms:** Other Rooms: 0 0

**COUNTRY COMFORT COMMUNITY HOME** 

204 JOE APREE CIR

BLYTHEWOOD, SC 29016-8807 FACILITY #:803-735-9777

COUNTS, CLIFFORD A PH#: 803-920-9927

Facility Email: COUNTS\_COUNTRYCOMFORT@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1467 / 02/29/2016

Richland /

COUNTRY COMFORT HOMES LLC

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0 Max # Beds: 0

**Total Number of Licensed Beds Resident Beds:** 

9

q 4

Staff Beds:

Other Beds:

1

**Resident Rooms:** 

Staff Rooms:

Other Beds:

0

Other Rooms:

1 0

0

COUNTRYWOOD ASSISTED LIVING

1645 RIDGE RD

HOPKINS, SC 29061-8432 FACILITY #:803-776-3873

HUNT, JOSEPH R PH#: 803-776-3873

Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

JHUNT@STERLING-HEALTH.COM

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0 Max # Beds: 0

CRC-1465 / 11/30/2015 Richland / Ltd. Liability

1645 RIDGE RD

HOPKINS, SC 29061-8432

COUNTRYWOOD NURSING CENTER LLC

Total Number of Licensed Beds 26

Resident Beds: Staff Beds:

26

Resident Rooms: 13

0

Staff Rooms: 0

Other Beds:

0

Other Rooms:

hlcrc.rdf

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0758 / 03/31/2016

2825 CARTER RD OFC

SUMTER, SC 29150-1736

Sumter / Non-Profit Corporation

COVENANT PLACE OF SUMTER INC

**COVENANT PLACE** 

2825 CARTER RD OFC

SUMTER, SC 29150-1736

LINDER SR, RISLEY E PH#: 803-469-7007

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

Total Number of Licensed Beds 70

CRC-1544 / 03/31/2016

Richland / Limited Liability

ROANOKE, VA 24014-5300

COLUMBIA AL OPERATIONS LLC

Resident Beds: 70 Staff Beds: 0 Other Beds:

0

4423 PHEASANT RIDGE RD STE 301

Resident Rooms: Staff Rooms:

Other Rooms: 0

61

0

89

0

0

4

0

0

hlcrc.rdf

**CROSSINGS AT COLUMBIA** 

2300 CLEMSON RD

COLUMBIA, SC 29229-8029 FACILITY #:000-000-0000

PH#:

Facility Email: SECKERT@HARMONYSENIORSERVICES.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

**Total Number of Licensed Beds** 110

CRC-0743 / 05/31/2016

Resident Beds: 110 Staff Beds: 0 Other Beds: 0

York /

Staff Rooms: Other Rooms:

Resident Rooms:

**CROSSROADS AT CATAWBA** 

400 ROWELLS RD

EDWARDS, JAMES A PH#:

Alzheimer Care: No

Alzheimer Unit: No

Facility Email: JIM\_CROSSROADS@COMPORIUM.NET

CATAWBA, SC 29704-8769 FACILITY #:803-329-3377

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0

Max # Beds: 0

CROSSROADS AT CATAWBA LLC

**Total Number of Licensed Beds** 72

Resident Beds: 72 Resident Rooms: 31 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**CUMMINGS COMMUNITY RESIDENTIAL CARE HOME** 

2606 STARK LN Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-5537 FACILITY #:843-747-7088

CUMMINGS, OLYMPIA W PH#: 843-860-2340

OCUMMINGS03@COMCAST.NET Facility Email:

Fac. Cont. Email: OCUMMINGS03@COMCAST.NET

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

CRC-0891 / 10/31/2015

CUMMINGS, OLYMPIA W

**Total Number of Licensed Beds** 

0

**Resident Beds:** 8 Staff Beds: 0

Other Beds:

Resident Rooms: Staff Rooms: Other Rooms:

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1187 / 11/30/2015

Charleston / Corporation

2021 COSGROVE AVE

**Total Number of Licensed Beds** 

JFJ INC

Resident Beds:

Staff Beds:

Other Beds:

NORTH CHARLESTON, SC 29405-7710

**CURAMENG RESIDENTIAL HOME CARE** 

2021 COSGROVE AVE

NORTH CHARLESTON, SC 29405-7710 FACILITY #:843-566-1266

REYES, MILAGROS L PH#: 843-566-1266

Facility Email: CURAMEFT@YAHOO.COM

Fac. Cont. Email: CURAMEFT@YAHOO.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

SUMMERVILLE, SC 29485-8104 FACILITY #:843-875-7163

DOLLASON, KRISTEN PH#: 843-875-7163 Facility Email: KDAUGHERTY@ENLIVANT.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

CYPRESS PLACE

205 MIDLAND PKWY

Max # Residents: 4

Alzheimer Unit: No

Max # Beds: 0

1231 EUTAW ST ORANGEBURG, SC 29115-3529 FACILITY #:803-531-6534

ROBERTS, VERONA J PH#: 803-928-6575

DALTONS CMC RESIDENTIAL CARE FACILITY

Facility Email: CHERYLGDALTON@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

DAVIDSON STREET COMMUNITY RESIDENCE

313 DAVIDSON ST

CLINTON, SC 29325-2023 FACILITY #:864-833-7284

MERCER, PHYLLIS D PH#: 864-984-3506

DMERCER@LCDSNB.ORG Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0 Alzheimer Unit: No Max # Beds: 0

**Resident Beds:** 

Other Beds:

8 0

0 0

Resident Rooms: Staff Rooms:

Other Rooms:

R

0

3

1

CRC-1411 / 11/30/2015 Dorchester / Limited Liability

8

2

0

330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605

CYPRESS AID OPCO LLC

Total Number of Licensed Beds: 44

Resident Beds: 44 Staff Beds: 0 Other Beds:

0

Other Rooms:

Resident Rooms:

**Staff Rooms:** 

0

39

0

3

0

0

8

CRC-1447 / 07/31/2016

Orangeburg / Sole Proprietorship

1231 EUTAW ST

ORANGEBURG, SC 29115-3529

CHERYL GIBSON-DALTON

**Total Number of Licensed Beds** 5

5 Resident Beds: **Resident Rooms:** Staff Beds: 0

0

Staff Rooms:

Other Rooms:

CRC-1420 / 12/31/2015

Laurens / Non-Profit Corporation

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

**Total Number of Licensed Beds**:

Resident Rooms: Staff Beds: Staff Rooms: Other Beds: 0 Other Rooms:

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

DAVIS COMMUNITY CARE HOME

2306 HEYWARD BROCKINGTON RD

COLUMBIA, SC 29203-9679 FACILITY #:803-754-5677

HARVEY, ALTHEA PH#: 803-754-5677

Facility Email: DAVISEUGINIA@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0240 / 07/31/2016 Richland / Partnership

CRC-1385 / 04/30/2016

Charleston / Ltd. Liability

HOLLYWOOD, SC 29449-6119

DAYSPRING ASSISTED LIVING LLC

5146 TOWLES RD

PO BOX 3273

COLUMBIA, SC 29230-3273

THOMASENA DAVIS EUGENIA M EARGLE & ELIJAH DAVIS

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 19

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 19 Resident Rooms: 8

> Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

DAYSPRING ASSISTED LIVING

5146 TOWLES RD

HOLLYWOOD, SC 29449-6119 FACILITY #:843-889-9757

MARSHALL, YASSAMIN B PH#: 843-889-9757 Facility Email: YASSIMARSHALL@YAHOO.COM

Fac. Cont. Email: DAYSPRINGSC@YAHOO.COM

Alzheimer Care: Yes Max # Residents: 16 **Total Number of Licensed Beds** 16

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 16 Resident Rooms: 12 Staff Beds: 1 Staff Rooms:

Other Beds: 0 Other Rooms: 0

**DILLON COMMUNITY RESIDENCE** 

506 S 14TH AVE

DILLON, SC 29536-4369 FACILITY #:843-841-0778

MITCHELL, MARCELLA A PH#: 843-774-6775

Facility Email: GKEITH@MDDSN.ORG

Fac. Cont. Email: GKEITH@MDDSN.ORG

Alzheimer Unit: No Max # Beds: 0 CRC-1377 / 04/30/2016

Dillon / County PO BOX 2072

DILLON, SC 29536-2072

MARION-DILLON COUNTY BOARD OF DISABILITIES AND SPECIAL

**NEEDS** 

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**: R

Resident Beds: 8 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

DIVINE MANOR ASSISTED LIVING CENTER

2210 OAK POND RD

Alzheimer Unit: No

ROCK HILL, SC 29730-7958 FACILITY #:803-329-4494

AFAM, DORIS O PH#: 864-591-2222

Facility Email: DIVINEMANOR@COMPORIUM.NET Fac. Cont. Email: DIVINEMANOR@COMPORIUM.NET

Alzheimer Care: Yes

Max # Residents: 4

Max # Beds: 0

CRC-1361 / 07/31/2016 York / Limited Liability 2210 OAK POND RD

ROCK HILL, SC 29730-7958 DIVINE NURSE CONSULTANT LLC

Total Number of Licensed Beds 32

**Resident Beds:** 32 Resident Rooms: 16 Staff Beds: 0 Staff Rooms: 0 0

Other Beds: 0 Other Rooms:

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**DIXON'S COMMUNITY CARE HOME** 

1456 DIXON RD

ELGIN, SC 29045-9030 FACILITY #:803-729-4309

DIXON, JAMES M PH#: 803-729-4309

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0934 / 10/01/2016 Kershaw / Corporation

PO BOX 306

ELGIN, SC 29045-0306

DIXON'S COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DORCAS RESIDENTIAL CARE I CRC-1251 / 11/30/2015

1131 BEXLEY ST Charleston / Partnership

NORTH CHARLESTON, SC 29405-4726 FACILITY #:843-746-9800 PO BOX 61870

RELLORA, WILHELMINA C PH#: 843-746-9800 NORTH CHARLESTON, SC 29419-1870

Facility Email: JNAVEARELLORA@NETZERO.NET JESUS N AND WILHELMINA C RELLORA

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 2

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

CRC-1252 / 11/30/2015

CRC-1078 / 04/30/2016

Clarendon / Partnership

MANNING, SC 29102-0122

**PO BOX 122** 

DORCAS RESIDENTIAL CARE II

1133 BEXLEY ST Charleston / Partnership

NORTH CHARLESTON, SC 29405-4726 FACILITY #:843-747-4800 PO BOX 61870

RELLORA, WILHELMINA C PH#: 843-746-9800 NORTH CHARLESTON, SC 29419-1870

Facility Email: JNAVEARELLORA@NETZERO.NET JESUS N AND WILHELMINA C RELLORA

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 3

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

DORCH COMMUNITY RESIDENTIAL CARE

3955 GREELEYVILLE HWY

MANNING, SC 29102-6000 FACILITY #:803-473-4681

DORCH-MINGER, ROXIE PH#:

Facility Email: DORCHANDREW@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Al-haiman Cana, Vaa May # Daaidanta

Alzheimer Care: Yes Max # Residents: 3 Total Number of Licensed Beds 13

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 13 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EVELYN DORCH LEWIS AND ANDREW DORCH

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

4609 ARLINGTON ST

ANNIE R DOWDY

**DOWDY'S COMMUNITY CARE HOME #2** 

4609 ARLINGTON ST

COLUMBIA, SC 29203-4143 FACILITY #:803-786-2105

DOWDY, ANNIE R PH#: 803-786-2105

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** 

Richland / Sole Proprietorship

COLUMBIA, SC 29203-4143

Resident Beds: 9 Staff Beds:

Other Beds:

1

CRC-0173 / 08/31/2015 (Renewal Pending)

Resident Rooms: 4 Staff Rooms: 1 0

0

Other Rooms:

DREAMLAND RESIDENTIAL CARE

6941 NORTH RD

NORTH, SC 29112-8832 FACILITY #:803-533-7492

WRIGHT, DELORES M PH#: 803-533-7492 Facility Email: DELORESWRIGHT4@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

CRC-0795 / 12/31/2015

Orangeburg / Sole Proprietorship

6941 NORTH RD

NORTH, SC 29112-8832 **DELORES M WRIGHT** 

**Total Number of Licensed Beds** 

**Resident Beds:** 5 Staff Beds: 0 Other Beds: 0

Resident Rooms: **Staff Rooms:** 

4

0

11

Other Rooms:

**EASLEY RETIREMENT CENTER** 

102 DOWLING ST

EASLEY, SC 29640-2424 FACILITY #:864-859-3722

OWENS, BERT J PH#: 864-859-3722

Facility Email: SARAFOSTER@EASLEYRETIREMENT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0359 / 02/28/2016 Pickens / Corporation

PO BOX 736

EASLEY, SC 29641-0736

WEST END RETIREMENT CENTER INC

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

**Total Number of Licensed Beds** 28

Resident Beds: 28 **Resident Rooms:** 

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**EASY LIVING** 

506 E JACKSON ST

LAMAR, SC 29069-9162 FACILITY #:843-326-5884

GEORGE, EDELL PH#: 843-206-9317 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1512 / 03/31/2016

Darlington / Sole Proprietorship

PO BOX 85

LAMAR, SC 29069-0085

GEORGE, EDELL

**Total Number of Licensed Beds**:

5 **Resident Beds:** Staff Beds:

0

Resident Rooms:

0

Staff Rooms: Other Rooms:

0 0

5

Other Beds:

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**EDEN TERRACE OF SPARTANBURG** 

2780 E MAIN ST

SPARTANBURG, SC 29307-1248 FACILITY #:864-579-7387

HUGHES, CINDY B PH#: 864-579-7387

Facility Email: CHUGHES@ARBORCOMPANY.COM
Fac. Cont. Email: CWATSON@ARBORCOMPANY.COM

CRC-1213 / 05/31/2016 Spartanburg / Ltd. Liability

2780 E MAIN ST

SPARTANBURG, SC 29307 BRISTOL SPARTANBURG LLC

CRC-0272 / 10/31/2015

**PO BOX 265** 

Orangeburg / Corporation

BOWMAN, SC 29018-0265

CRC-1422 / 10/31/2015

Florence / Ltd. Liability

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 140

Alzheimer Unit: Yes Max # Beds: 48 Resident Beds: 140 Resident Rooms: 111

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ELLIOTT'S RESIDENTIAL CARE HOME

2432 LANDSDOWNE RD

BOWMAN, SC 29018-9583 FACILITY #:803-829-3348

LEVINS, DEBORAH Y PH#: 803-829-3348

Facility Email: ELLIOTTSCAREHOME@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 7 Resident Rooms: 3
Staff Beds: 1 Staff Rooms: 1

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

9510 ORMSBY STATION RD STE 101

LOUISVILLE, KY 40223-4082

EC FLORENCE OPERATIONS LLC

7

ELLIOTT'S RESIDENTIAL CARE HOME INC

**ELMCROFT OF FLORENCE** 

3006 HOFFMEYER RD

FLORENCE, SC 29501-7551 FACILITY #:843-292-0012

ROBINSON, SHIRLEY PH#: 843-292-0012

Facility Email: SROBINSON@ELMCROFT.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 38 Total Number of Licensed Beds 82

Alzheimer Unit: Yes Max # Beds: 38 Resident Beds: 82 Resident Rooms: 78

Staff Beds:0Staff Rooms:0Other Beds:0Other Rooms:0

EMERALD GARDENS OF GREENWOOD

201 OVERLAND DR

GREENWOOD, SC 29646-4097 FACILITY #:864-953-2174

PATTERSON, MICHAEL L PH#: 864-953-2174

Facility Email: MPATTERSON@PREMIERSL.COM
Fac. Cont. Email: MPATTERSON@PREMIERS1.COM

Alzheimer Care: Yes Max # Residents: 16

Alzheimer Unit: Yes Max # Beds: 16

CRC-1378 / 10/31/2015 Greenwood / Ltd. Liability 201 OVERLAND DR

GREENWOOD, SC 29646-4097

EMERALD GARDENS OF GREENWOOD LLC

Total Number of Licensed Beds 66

Resident Beds: 66 Resident Rooms: 48
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**EMERALD RCF I** 

2244 BROWNTOWN RD

BISHOPVILLE, SC 29010-9664 FACILITY #:803-428-5407

FORTUNE, ELLA R PH#: 803-428-5407

Facility Email: TCH93@SCDMH.ORG

Fac. Cont. Email: ERF03@SCDMH.ORG

CRC-1205 / 06/30/2016

Lee / State

2244 BROWNTOWN RD

CRC-1206 / 06/30/2016

2262 BROWNTOWN RD

CRC-1303 / 03/31/2016

Anderson / Corporation

3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032

**EMERITUS CORPORATION** 

CRC-0858 / 01/31/2016

Pickens / Corporation

125 ZION SCHOOL RD EASLEY, SC 29642-2833

**EMERITUS CORPORATION** 

BISHOPVILLE, SC 29010-9664

Lee / State

BISHOPVILLE, SC 29010-9664

SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

SANTEE-WATEREE COMMUNITY MENTAL HEALTH CENTER

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 5

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**EMERALD RCF II** 

2262 BROWNTOWN RD

BISHOPVILLE, SC 29010-9664 FACILITY #:803-428-5407

FORTUNE, ELLA R PH#: 803-428-6044

Facility Email: ERF03@SCDMH.ORG

Fac. Cont. Email: TTHLL@DMH.STATE.SC.US

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 5 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**EMERITUS AT ANDERSON PLACE** 

311 SIMPSON RD

ANDERSON, SC 29621-2157 FACILITY #:864-261-3875

TOWERY, AL PH#: 864-370-2181

Facility Email: ANDERSONPLACE-ED@EMERTUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 40

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 40 Resident Rooms: 30

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

EMERITUS AT COUNTRYSIDE PARK

125 ZION SCHOOL RD

EASLEY, SC 29642-2833 FACILITY #:864-859-4684

HESS, HEATHER L PH#: 864-859-4684

Facility Email: COUNTRYSIDEPARK-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 0 Total Number of Licensed Beds 66

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 66 Resident Rooms: 46

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

0

0

# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**EMERITUS AT COUNTRYSIDE VILLAGE** 

706 PELZER HWY

Alzheimer Care: Yes

EASLEY, SC 29642-2941 FACILITY #:864-859-0167

HESS, HEATHER L PH#: 864-859-4684

Facility Email: COUNTRYSIDEVILLAGE-ED@EMERITUS.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0857 / 01/31/2016 Pickens / Corporation

3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1032

**EMERITUS CORPORATION** 

Total Number of Licensed Beds 85

Alzheimer Unit: Yes Max # Beds: 16

Resident Beds: 85 Resident Rooms: Staff Beds: 0 Staff Rooms:

Other Beds: 0 Other Rooms:

CRC-1397 / 08/31/2015 (Renewal Pending)

**EMERITUS AT HAWTHORNE INN AT HILTON HEAD** 

Beaufort / Corporation 15 MAIN ST

HILTON HEAD ISLAND, SC 29926-4604 FACILITY #:843-342-6565 3131 ELLIOTT AVE STE 500

Max # Residents: 16

HERNDON, ADAM W PH#:

SEATTLE, WA 98121-1032 Facility Email: HILTONHEAD-ED@EMERITUS.COM **EMERITUS CORPORATION** 

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 51

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 51 Resident Rooms: 39 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

**EMERITUS AT SKYLYN PLACE** 

1705 SKYLYN DR OFC

SPARTANBURG, SC 29307-1090 FACILITY #:864-582-6838

TIM, BARRESI PH#: 864-582-6838

Facility Email: REGINA.FARGIS@BROOKDALE.COM CRC-0856 / 01/31/2016

Spartanburg / Corporation 3131 ELLIOTT AVE STE 500

SEATTLE, WA 98121-1032 **EMERITUS CORPORATION** 

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 20 **Total Number of Licensed Beds** 169

Alzheimer Unit: Yes Max # Beds: 20 Resident Beds: 169 Resident Rooms: 115

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**EUGENIA'S RESIDENTIAL CARE FACILITY** 

2232 HEYWARD BROCKINGTON RD

COLUMBIA, SC 29203-9677 FACILITY #:803-786-1047

DAVIS-EARGLE, EUGENIA M PH#: 803-786-0011

DAVIS\_EUGINIAS@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0538 / 08/31/2016 Richland / Partnership

PO BOX 3273

COLUMBIA, SC 29230-3273

ELIJAH DAVIS THOMASENA DAVIS & EUGENIA M EARGLE

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 23

Resident Beds: 23 Resident Rooms: 13 Staff Beds: 0 Staff Rooms: 0 0

Other Beds: 0 Other Rooms:

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**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**EVELYN'S RESIDENTIAL CARE FACILITY** 

162 S MCQUEEN ST

FLORENCE, SC 29501-4439 FACILITY #:843-665-5751

HOWARD, MARGARET P PH#: 843-665-5751

Facility Email: MPHRVAS.MH@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1164 / 05/31/2016

Florence / Sole Proprietorship

PO BOX 5846

FLORENCE, SC 29502-5846

**EVELYN R CUSAAC** 

CRC-0026 / 03/31/2016

Charleston / Corporation

CRC-0760 / 04/30/2016

MARY SIMS TOUCHTON

CRC-1233 / 02/29/2016

21 EDWARDS ST

WALTERS, MICHAEL A

Sumter / Sole Proprietorship

SUMTER, SC 29150-4808

PO BOX 13866

Anderson / Sole Proprietorship

ANDERSON, SC 29624-0018

CHARLESTON, SC 29417-1774

**EVERGREEN RESIDENTIAL CARE INC** 

PO BOX 31774

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds S

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 9 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**EVERGREEN RESIDENTIAL CARE INC I** 

1612 EVERGREEN ST

CHARLESTON, SC 29407-6263 FACILITY #:843-402-6860

LESESNE, CLARA P PH#: 843-744-1249

Facility Email: EVERGREEN\_1818@HOTMAIL.COM

Fac. Cont. Email: EVERGREEN1818@MSN.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 5
Staff Beds: 1 Staff Rooms: 1

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

**FAITH HOPE AND CHARITY RETIREMENT** 

101 COE ST

ANDERSON, SC 29624 FACILITY #:864-226-0990

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 5

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

**FAMILY RESIDENTIAL CARE HOME I** 

21 EDWARDS ST

SUMTER, SC 29150-4808 FACILITY #:803-775-9555

WALTERS, MICHAEL A PH#: 803-775-9555

Facility Email: FAMILYRCH1N2@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 3 Total Number of Licensed Beds 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 2

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**FAMILY RESIDENTIAL CARE HOME II** 

23 EDWARDS ST

SUMTER, SC 29150-4808 FACILITY #:803-775-9555

WALTERS, MICHAEL A PH#: 803-775-9555 Facility Email: FAMILYRCH1N2@YAHOO.COM Fac. Cont. Email: No Facility Contact Email on Record CRC-1277 / 06/30/2016 Sumter / Sole Proprietorship

23 EDWARDS ST

SUMTER, SC 29150-4808 WALTERS, MICHAEL A

Alzheimer Care: Yes

Max # Residents: 3

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 5

**Resident Beds:** 5 Resident Rooms: 2 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

FAMILY RESIDENTIAL CARE HOME III

25 EDWARDS ST

SUMTER, SC 29150-4808 FACILITY #:803-775-9555

WILLIAMS, TRACEY L PH#: 803-775-9555 Facility Email: TWRG32@YAHOO.COM Fac. Cont. Email: TRACEW90@AOL.COM

CRC-1537 / 02/29/2016

25 EDWARDS ST

SUMTER, SC 29150-4808 WALTERS, MICHAEL A

Sumter / Sole Proprietorship

**Alzheimer Care: No** 

Max # Residents: 0

Max # Beds: 0 Alzheimer Unit: No

**Total Number of Licensed Beds** 12

Resident Beds: 12 Resident Rooms: 6 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**FARMINGTON COMMUNITY RESIDENCE** 

**1269 CAMP RD** 

JAMES ISLAND, SC 29412-9212 FACILITY #:843-805-5820

CAPERS, MADLYN PH#: 843-805-5820

Facility Email: DGOLDMINTZ@DSNCC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1370 / 01/31/2016

Charleston / State

PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** R

Resident Beds: 8 Resident Rooms: 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

FIRST CHOICE HOME CARE FACILITY

2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405-5702 FACILITY #:843-225-0637

RELLORA, WILHELMINA C PH#: 843-566-0460

JNAVEARELLORA@NETZERO.NET Facility Email:

CRC-0742 / 10/31/2015

Charleston / Partnership 2003 COSGROVE AVE

NORTH CHARLESTON, SC 29405-5702

DQR CAMBA/NM CAMBA/GT MARTINEZ/P MARTINEZ/P PAJOTA

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No Max # Beds: 0

Max # Residents: 0 **Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 8 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

FLANAGAN COMMUNITY CARE HOME

665 SHARPE RD

COLUMBIA, SC 29203-9304 FACILITY #:803-754-2136

BRIGGS, MARY E PH#: 803-754-2136

Facility Email: MARYBRIGGS1@AOL.COM

Fac. Cont. Email: M-BRIGGS@BELLSOUTH.NET

CRC-0314 / 09/30/2015

Richland / Sole Proprietorship

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 9 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 1 Other Rooms: 0

Other Beds: 0

CRC-1519 / 12/31/2015

Sumter / Sole Proprietorship

YORK-HERRIOTT, LUCINDA

CRC-0376 / 03/31/2016

1930 CHANEY ST

THEODORE FLOWERS

CRC-0297 / 11/30/2015

855 WATTS HILL RD

MARY C FLOWERS

Kershaw / Sole Proprietorship

LUGOFF, SC 29078-9234

Richland / Sole Proprietorship

COLUMBIA, SC 29204-1632

BRIGGS, MARY E

FLORA'S RESIDENTIAL CARE FACILITY II

703 S HARVIN ST

**Alzheimer Care: No** 

SUMTER, SC 29150-6415 FACILITY #:803-775-6077 YORK-HERRIOTT, LUCINDA PH#: 803-316-8591

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 3 Staff Beds: 1 **Staff Rooms:** 

Other Beds: 0 Other Rooms: 0

FLOWERS COMMUNITY RESIDENTIAL CARE

1930 CHANEY ST

COLUMBIA, SC 29204-1632 FACILITY #:803-735-0920

FLOWERS, THEODORE PH#: 803-735-0920

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 11

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 11 **Resident Rooms:** 6

> Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

FLOWERS RESIDENTIAL CARE FACILITY

855 WATTS HILL RD

LUGOFF, SC 29078-9234 FACILITY #:803-438-2654

FLOWERS, MARY C PH#: 803-438-2654

MFLOW79255@AOL.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2 Total Number of Licensed Beds 7

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** Resident Rooms: 7 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CRC-1364 / 08/31/2016

CRC-1230 / 12/31/2015

Oconee / Corporation

927 E NORTH 1ST ST

CRC-1527 / 09/30/2015

CRC-0500 / 11/30/2015

Edgefield / Corporation

MCCORMICK, SC 29835-3524

141 CALLISON HWY

HILLSIDE INC

Colleton /

SENECA, SC 29678-2829

JAMES ARNOLD STEVENS INC

LEXINGTON, SC 29072-8492

Oconee / Corporation

106 MARLEE CT

FOOTHILLS ASSISTED LIVING

999 W UNION RD

WEST UNION, SC 29696-2642 FACILITY #:864-638-4370

STEWART, VIRGINIA B PH#: 864-638-4370

Facility Email: FOOTHILLSMANOR@YAHOO.COM

Fac. Cont. Email: FOOTHILLSMANOR@YAHOO.COM

Alzheimer Care: Yes Max # Residents: 18 Total Number of Licensed Beds 76

Alzheimer Unit: Yes Max # Beds: 20 Resident Beds: 76 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CITE HEALTH MANAGEMENT SERVICES INC

FOR A SEASON ASSISTED LIVING

927 E NORTH 1ST ST

SENECA, SC 29678-2829 FACILITY #:864-886-0083

ARNOLD, MARTHA B PH#: 864-886-0083 **Facility Email:** No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 5 Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FOREST CIRCLE COMMUNITY RESIDENCE

505 FOREST CIR

WALTERBORO, SC 29488-2869 FACILITY #:843-549-8140

FARMER, THERESA L PH#:

Facility Email: DREDD@COLLETONDSN.ORG COLLETON COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

FOREST VIEW MANOR RETIREMENT CENTER

141 CALLISON HWY

MCCORMICK, SC 29835-3524 FACILITY #:864-443-5857

NIXON, KENNETH M PH#: 803-637-5857

Facility Email: KMNIXON62@AOL.COM

Fac. Cont. Email: KMNIXON62@AOL.COM

Alzheimer Care: Yes Max # Residents: 3 Total Number of Licensed Beds 40

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 40 Resident Rooms: 27

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CRC-1437 / 07/31/2016

Anderson / Ltd. Liability

ANDERSON, SC 29621-2545

ARHC GHANDSC01 TRS LLC

CRC-1222 / 08/31/2016

Greenville / Ltd. Liability

275 COMMONWEALTH DR

GREENVILLE, SC 29615-4814

EASTSIDE ASSISTED LIVING LLC

FRANKE HOME CRC-1082 / 09/30/2016

1885 RIFLE RANGE RD Charleston / Non-Profit Corporation

MOUNT PLEASANT, SC 29464-9440 FACILITY #:843-856-4700 1885 RIFLE RANGE RD

STOLL, SANDRA A PH#: 843-856-4700 MOUNT PLEASANT, SC 29464-9440

Facility Email: SSTOLL@FRANKEATSEASIDE.ORG LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 22 Total Number of Licensed Beds 86

Alzheimer Unit: Yes Max # Beds: 22 Resident Beds: 86 Resident Rooms: 62

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**GARDEN HOUSE** 

201 EDGEBROOK DR

ANDERSON, SC 29621-2573 FACILITY #:864-964-5668 201 EDGEBROOK DR

BRADLEY-GUIBAULT, KATHLEEN PH#: 864-964-5668 **Facility Email:** DIRECTOR@GARDENHOUSE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 18 Total Number of Licensed Beds 75

Alzheimer Unit: Yes Max # Beds: 18 Resident Beds: 75 Resident Rooms:

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**GARDENS AT EASTSIDE** 

275 COMMONWEALTH DR

GREENVILLE, SC 29615-4814 FACILITY #:864-329-1200

FORD, JANE A PH#: 864-329-1200

Facility Email: JFORD@ARBORCOMPANY.COM

Fac. Cont. Email: JHARPER@ARBORCOMPANY.COM

Alzheimer Care: Yes Max # Residents: 14 Total Number of Licensed Beds 83

Alzheimer Unit: Yes Max # Beds: 14 Resident Beds: 83 Resident Rooms: 71

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

CRC-0431 / 05/31/2015 (Renewal Pending)

**GENE'S RESIDENTIAL CARE #1** 

607 W SUMTER ST

FLORENCE, SC 29501-2458 FACILITY #:843-662-2529

JONES, CASSIE T PH#: 843-662-2529

Fac. Cont. Email: JOHNATHANCAM06@ICLOUD.COM
Fac. Cont. Email: CAREGENE@BELLSOUTH.NET

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds 6

Florence / Sole Proprietorship

FLORENCE, SC 29506-0101

Resident Beds: 6 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms:

PO BOX 15101

**GENE E JONES** 

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1479 / 06/30/2016

FLORENCE, SC 29506-0101

Florence / Corporation

PO BOX 15101

**GENCASCO INC** 

**GENE'S RESIDENTIAL CARE FACILITY #2** 

2385 PAMPLICO HWY

FLORENCE, SC 29505-7515 FACILITY #:843-407-4580

JONES, GENE E PH#: 843-407-4580

JOHNATHANCAM06@ICLOUD.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 47

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 47 Resident Rooms: 33

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**GENE E JONES** 

FLORENCE, SC 29506-6919

CRC-0647 / 09/30/2016

Lexington / Corporation

CRC-1128 / 10/31/2015

Lexington / Corporation

431 E BOUNDARY ST CHAPIN, SC 29036-8388

GENERATIONS OF CHAPIN INC

111 GENERATIONS BLVD

BATESBURG, SC 29006-2315

GENERATIONS OF BATESBURG INC

**GENE'S RESIDENTIAL CARE FACILITY #3** CRC-0482 / 02/28/2016

1312 W EVANS ST Florence / Sole Proprietorship

FLORENCE, SC 29501-3324 FACILITY #:843-667-6636 622 E MCIVER RD

Facility Email: JOHNATHANCAM06@ICLOUD.COM

Fac. Cont. Email: No Facility Contact Email on Record

JONES, CASSIE T PH#: 843-667-6636

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 9 Resident Rooms: 4

Staff Beds: 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

**GENERATIONS OF BATESBURG** 

111 GENERATIONS BLVD

BATESBURG, SC 29006-2315 FACILITY #:803-532-8428

NIX, HAMMIE R PH#: 803-532-8428

Facility Email: TODD@GENERATIONSOFCHAPINCOM Fac. Cont. Email: TODD@GENERATIONSOFCHAPINCOM

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 88

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 88 Resident Rooms: 58

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**GENERATIONS OF CHAPIN** 

431 E BOUNDARY ST

CHAPIN, SC 29036-8388 FACILITY #:803-345-1911

SLICE, TIMOTHY H PH#: 803-345-1911

TIM@GENERATIONSOFCHAPIN.COM Facility Email: Fac. Cont. Email: TIM@GENERATIONSOFCHAPIN.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 64

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 64 Resident Rooms: 54

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

0

#### **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CRC-1477 / 05/31/2016

7142 WOODROW ST

IRMO, SC 29063-2832

Lexington / Limited Liability

GENERATIONS OF IRMO LLC

**GENERATIONS OF IRMO** 

7142 WOODROW ST

IRMO, SC 29063-2832 FACILITY #:803-227-8991

SLICE, LOUETTA A PH#: 803-345-1911

Facility Email: LOUETTA@GENERATIONSOFCHAPIN.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 6

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds 78

Resident Beds: 78 Resident Rooms: 78 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms:

CRC-0876 / 10/31/2015

CRC-1237 / 12/31/2015

HAZEL LEIGH AYERS

**Total Number of Licensed Beds** 

CRC-0333 / 02/28/2016

KELL, JIMI LYN SMITH

PO BOX 1465

Orangeburg / Sole Proprietorship

ORANGEBURG, SC 29116-1465

Aiken / Sole Proprietorship

MONETTA, SC 29105-0096

GENERATIONS OF MONETTA LLC

Aiken / Ltd. Liability

PO BOX 96

**GENERATIONS OF MONETTA** 

77 CATO RD

MONETTA, SC 29105-9319 FACILITY #:803-685-6156

JAMISON, FELICIA D PH#:

Facility Email: TODD@GENERATIONSOFCHAPIN.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Max # Residents: 0 Total Number of Licensed Beds 22

Resident Beds: 22 Resident Rooms: 11
Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms:

516 BELVEDERE CLEARWATER RD

NORTH AUGUSTA, SC 29841-2583

q

**GOD'S HAVEN OF REST** 

Alzheimer Care: Yes

516 BELVEDERE CLEARWATER RD

NORTH AUGUSTA, SC 29841-2583 FACILITY #:803-279-1129

Max # Residents: 5

AYERS, HAZEL L PH#: 803-279-1129

Facility Email: LEIGH.3@COMCAST.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Unit: Yes Max # Beds: 5 Resident Beds: 9 Resident Rooms: 5

Staff Beds: 3 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

**GOLDEN YEARS** 

139 SEMINOLE DR

ORANGEBURG, SC 29115-7619 FACILITY #:803-536-0060

SMITH-KELL, JIMI LYN PH#: 803-531-4386

Facility Email: JL333SMITH@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 15

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 15 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1015 / 05/31/2016 Williamsburg / Corporation

1356 BUBZY RD

GOOD SAMARITAN RESIDENTIAL CARE

1356 BUBZY RD

KINGSTREE, SC 29556-5246 FACILITY #:843-382-3530

DUROUSSEAU, MATTIE H PH#:

GOODSAMARITAN1000@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 

CRC-0639 / 06/30/2016

Berkeley / Corporation

NL & JR INCORPORATED

CRC-0762 / 04/30/2016

Berkeley / Corporation

NL & JR INCORPORATED

CRC-0584 / 08/31/2016

Bamberg / Corporation

DENMARK, SC 29042-0326

**PO BOX 326** 

104 MARILYN ST

104 MARILYN ST

KINGSTREE, SC 29556-5246

Resident Beds: 9 Resident Rooms: 3

GOOSE CREEK, SC 29445-3104

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GOOD SAMARITAN RESIDENTIAL CARE FACILITY INC

**GOOSE CREEK MANOR #1** 

Alzheimer Care: No

Alzheimer Unit: No

104 MARILYN ST

GOOSE CREEK, SC 29445-3104 FACILITY #:843-572-7442

DEDIOS, LETICIA G PH#: 843-572-7442

Facility Email: GOOSECREEKMANOR@AOL.COM

Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 

Max # Residents: 0

Max # Beds: 0

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 7 Resident Rooms: 4

Staff Beds: 2 **Staff Rooms:** 2 Other Beds: 0 Other Rooms: 0

7

**GOOSE CREEK MANOR #2** 

104 MARILYN ST

GOOSE CREEK, SC 29445-3104 FACILITY #:843-572-7442

DEDIOS, LETICIA G PH#: 843-572-7442

Facility Email: GOOSECREEKMANOR@AOL.COM Fac. Cont. Email: GOOSECREEKMANOR@AOL.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds: 36

GOOSE CREEK, SC 29445-3104

Resident Beds: 36 Resident Rooms: 16

> Staff Beds: 2 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

GRACE RESIDENTIAL CARE FACILITY

PO BOX 326

DENMARK, SC 29042 FACILITY #:803-793-3423

DAVIS, BERNESTINE C PH#: 803-793-3423

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 5 Total Number of Licensed Beds 22

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 22 Resident Rooms: 9

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GRACE RESIDENTIAL CARE FACILITY INC

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0665 / 01/31/2016

SUMTER, SC 29150-6829 **CARL AND SHIRLEY GREENE** 

CRC-1126 / 10/31/2015

142 PERKINS AVE

GREENE, CARL

Sumter / Sole Proprietorship

SUMTER, SC 29150-6829

CRC-0073 / 03/31/2016

GREENVILLE, SC 29606-8467

Greenville / State

PO BOX 17467

Sumter / Partnership

142 PERKINS AVE

**GREENE'S RESIDENTIAL CARE FACILITY** 

23 KENDRICK ST

SUMTER, SC 29150-5224 FACILITY #:803-778-2780

GREENE, CARL PH#: 803-778-2780 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 21

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 21 Resident Rooms: 9

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**GREENE'S RESIDENTIAL CARE II** 

28 S MAGNOLIA ST

SUMTER, SC 29150-5243 FACILITY #:803-934-6030

GREENE, CARL PH#: 803-778-2780 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 12

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 12 Resident Rooms: 5 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD

0

**GREENVILLE COMMUNITY RESIDENCE** 

158 CAVALIER DR

GREENVILLE, SC 29607-4262 FACILITY #:864-277-9656

WOJACK, DAVID C PH#: 864-277-0584

Facility Email: GREENVILLECRCF@GCDSNB.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 12

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 12 Resident Rooms: 12

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

GREENVILLE GLEN ASSISTED LIVING LLC

**GREENVILLE GLEN** 

1101 GARLINGTON RD

GREENVILLE, SC 29615-5446 FACILITY #:864-627-8700

CONNELLY, REATHA L PH#: 864-627-8700

ED@GREENVILLEGLEN.COM Facility Email: Fac. Cont. Email: MANNINGHOUSE@ALCCO.COM

Alzheimer Care: No Max # Residents: 0

Total Number of Licensed Beds 51

CRC-0887 / 01/31/2016

1101 GARLINGTON RD GREENVILLE, SC 29615-5446

Greenville / Limited Liability

Alzheimer Unit: No Max # Beds: 0 51 Resident Rooms: Resident Beds: 36 Staff Beds: 3 Staff Rooms: 0

Other Beds: 0 Other Rooms:

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1402 / 11/30/2015

Greenville / Corporation

2006 PELHAM RD

CSL LEASECO INC

**GREENVILLE PLACE** 2006 PELHAM RD

GREENVILLE, SC 29615-4005 FACILITY #:864-288-3331

PIZZOLA, KITTY J PH#: 864-288-3331

Facility Email: MDAVIDSON@CAPITALSENIORLIVING.NET

Fac. Cont. Email: MDAVIDSON@CAPITALSENIORLIVING.NET

Alzheimer Care: Yes Max # Residents: 53

Alzheimer Unit: Yes Max # Beds: 53

Total Number of Licensed Beds: 153

GREENVILLE, SC 29615-4005

Resident Beds: 153 Resident Rooms: 86 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**GREER COMMUNITY RESIDENCE** 

112 S BEVERLY LN

GREER, SC 29651-1738 FACILITY #:864-879-8570

MORTON, TAMARA L PH#: 864-879-8570

Facility Email: TMORTON.GCDSNB@YAHOO.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2

Alzheimer Unit: No Max # Beds: 0 CRC-0237 / 09/30/2015 Greenville / State

PO BOX 17467

GREENVILLE, SC 29606-8467

GREENVILLE COUNTY DISABILITIES & SPECIAL NEEDS BOARD

**Total Number of Licensed Beds** 12

**Resident Beds:** 12 Resident Rooms: 12 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**GREGORY'S COMMUNITY CARE #5 - MALONE HOUSE** 

2413 FORK SHOALS RD

PIEDMONT, SC 29673-8663 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-2269 Facility Email: JCGREGORY6@AOL.COM Fac. Cont. Email: LGRIKARD@HOTMAIL.COM CRC-0558 / 01/31/2016

Greenville / Sole Proprietorship

**PO BOX 637** 

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

**GREGORY'S COMMUNITY CARE #6 - HOWELL HOUSE** 

2409 FORK SHOALS RD

PIEDMONT, SC 29673-8663 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-1852 JCGREGORY6@AOL.COM Facility Email: Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0556 / 01/31/2016

Greenville / Sole Proprietorship

**PO BOX 637** 

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

Total Number of Licensed Beds: 10

**Resident Beds:** 10 Resident Rooms: 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**GREGORY'S COMMUNITY CARE #7 - CRAVEN HOUSE** 

10 FERGUSON RD

PIEDMONT, SC 29673-8603 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-0996

Facility Email: JCGREGORY6@AOL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

CRC-0555 / 01/31/2016

Greenville / Sole Proprietorship

PO BOX 637

SIMPSONVILLE, SC 29681-0637

JOYCE C GREGORY

CRC-0557 / 01/31/2016

**PO BOX 637** 

JOYCE C GREGORY

CRC-1049 / 11/30/2015

Charleston / Corporation

CRC-1405 / 11/30/2015

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605 HAMMOND AID OPCO LLC

Aiken /

2126 SUCCESS ST

Greenville / Sole Proprietorship

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GREGORY'S COMMUNITY CARE #8 - METZ HOUSE

18 FERGUSON RD

PIEDMONT, SC 29673-8603 FACILITY #:864-299-0716

GREGORY, JOYCE C PH#: 864-277-8506 SIMPSONVILLE, SC 29681-0637

Facility Email: JCGREGORY6@AOL.COM

Fac. Cont. Email: LGRIKARD@HOTMAIL.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GUARDIAN ANGELS RESIDENTIAL CARE

2126 SUCCESS ST

Alzheimer Care: No

NORTH CHARLESTON, SC 29405-7992 FACILITY #:843-744-0448

JANKE, BONIFACIA E PH#: 843-744-0448

Facility Email: BARRY.JANKE@YAHOO.COM

Fac. Cont. Email: BIGB1959@COMCAST.NET

Max # Residents: 0 Total Number of Licensed Beds 18

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 18 Resident Rooms: 6

Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

NORTH CHARLESTON, SC 29405-7992

GUARDIAN ANGELS ASSISTED LIVING INC

HAMMOND PLACE

128 WALNUT LN

NORTH AUGUSTA, SC 29860-9206 FACILITY #:803-441-8441

PH#:

Facility Email: ABARR@ENLIVANT.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 5 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

HAMPTON STREET COMMUNITY RESIDENCE

425 HAMPTON ST

DENMARK, SC 29042-1368 FACILITY #:803-793-5003

JAMES, GLORIA M PH#: 803-793-5003

Facility Email: GLORIAJ\_29059@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1296 / 06/30/2016

Bamberg /

Florence / Limited Liability

PAMPLICO, SC 29583-5700

3750 SHEMINALLY RD

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 4

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0

> > CRC-0712 / 05/31/2015 (Renewal Pending)

0 Other Rooms:

BAMBERG COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

R

HANNAH RESIDENTIAL MANOR INC

3750 SHEMINALLY RD

PAMPLICO, SC 29583-5700 FACILITY #:843-493-0001

HART, PATRICIA W PH#: 843-493-2398 Facility Email: HANNARM1993@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds** 48

Resident Beds: 48 Resident Rooms: 15 Staff Beds: 0 **Staff Rooms:** 0 Other Rooms: 0

HART'S RENTAL MANAGEMENT COMPANY LLC

Other Beds: 0

HARBISON HALL CRC-1107 / 06/30/2016

Richland / Partnership

534 WIL STEL RD

COLUMBIA, SC 29210-3967

HARBISON HALL PARTNERS

CRC-1316 / 11/30/2015

1385 SILVER BLUFF RD

AIKEN, SC 29803-8860

Aiken / Corporation

COLUMBIA, SC 29210-3967 FACILITY #:803-731-2000

534 WIL STEL RD

EVANS, JOSEPH A PH#: 803-731-2000

Facility Email: BRIANHHCOOK@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 40 Total Number of Licensed Beds: 40

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 40 **Resident Rooms:** 26

> Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

HARBORCHASE OF AIKEN

1385 SILVER BLUFF RD

AIKEN, SC 29803-8860 FACILITY #:803-642-8444

SMOLA, HEIDI L PH#: 803-642-8444

Facility Email: HSOMOLA@HRAONLINE.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 29 Total Number of Licensed Beds: 110

Alzheimer Unit: Yes Max # Beds: 29 Resident Beds: 110

Resident Rooms: 72 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

TWENTY TWO PACK MANAGEMENT CORPORATION

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## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1315 / 11/30/2015

Richland / Corporation

120 FAIRFOREST RD

HARBORCHASE OF COLUMBIA

120 FAIRFOREST RD

COLUMBIA, SC 29212-2308 FACILITY #:803-781-2243

MORRILL, MARY S PH#: 803-781-2243

Facility Email: MMORRILL@HRALONLINE.NET

Fac. Cont. Email: ADMIN@THEMORRILLALTERNATIVE.COM

Alzheimer Care: Yes

Max # Residents: 14

Alzheimer Unit: Yes Max # Beds: 14 Total Number of Licensed Beds 66

COLUMBIA, SC 29212-2308

Resident Beds: 66 Resident Rooms: Staff Beds: 0 Staff Rooms:

Other Beds: 0 Other Rooms: 0

TWENTY TWO PACK MANAGEMENT CORPORATION

HARBORCHASE OF ROCK HILL

1611 CONSTITUTION BLVD

ROCK HILL, SC 29732-3047 FACILITY #:803-981-6855

STOREY, KATHLEEN B PH#: 803-981-6855 Facility Email: KSTOREY@HRAONLINE.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 34

Alzheimer Unit: Yes Max # Beds: 34 CRC-1290 / 11/30/2015

York / Corporation

1611 CONSTITUTION BLVD ROCK HILL, SC 29732-3047

TWENTY TWO PACK MANAGEMENT CORPORATION

**Total Number of Licensed Beds** 110

Resident Beds: 110 Resident Rooms: 72 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

HARMONY HOUSE RESIDENTIAL CARE

704 ANDERSON ST

CALHOUN FALLS, SC 29628-1034 FACILITY #:864-418-9277

MYERS, ANNIE H PH#: 864-418-9277

Facility Email: HARMONYHOUSERCF@ATT.NET Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

CRC-1511 / 05/31/2016 Abbeville / Limited Liability

704 ANDERSON ST

CALHOUN FALLS, SC 29628-1034

HERRON CARE LLC

**Total Number of Licensed Beds** 16

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 16 Resident Rooms: 9

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

HAVEN IN THE SUMMIT

3 SUMMIT TER

COLUMBIA, SC 29229-7639 FACILITY #:803-788-4633

TYSON, GARY MARK PH#: 843-884-7977 Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: GTYSON@SANDPIPERCENTER.COM

Alzheimer Care: Yes Max # Residents: 60

Alzheimer Unit: Yes Max # Beds: 60 CRC-1240 / 03/31/2016

Richland / Limited Liability Limited Partnership

400 CENTRE ST

NEWTON, MA 02458-2094 MORNINGSIDE OF ANDERSON LP

Total Number of Licensed Beds 60

Resident Beds: 60 Resident Rooms: 48 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

HAVEN IN THE VILLAGE AT CHANTICLEER

355 BERKMANS LN

GREENVILLE, SC 29605-5606 FACILITY #:864-467-0031

SMITH, CATRINA L PH#: 864-497-0031

Facility Email: CMTHOMAS@5SQC.COM.

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1244 / 11/30/2015

Greenville / Limited Liability Limited Partnership

CRC-0576 / 12/31/2015

Union / Limited Liability

UNION, SC 29379-9023

CRC-0761 / 05/31/2016

Lancaster / Corporation

HEATH SPRINGS, SC 29058-0503

OAKMONT OF UNION SC LLC

709 RICE AVE EXT

MORNINGSIDE OF ANDERSON LP

Alzheimer Care: Yes Max # Residents: 60 Total Number of Licensed Beds 60

Alzheimer Unit: Yes Max # Beds: 60 Resident Beds: 60 Resident Rooms: 48

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

HEARTLAND HEALTH CARE CENTER-UNION (RESIDENTIAL CARE)

709 RICE AVE EXT

UNION, SC 29379-9023 FACILITY #:864-427-0306

KIMMONS JR, BOBBY R PH#: 864-427-0306

Facility Email: 4031ADMIN@HCR-MANORCARECOM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 40

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 40 Resident Rooms: 32

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

HEATH SPRINGS RESIDENTIAL CARE CENTER INC

**HEATH SPRINGS RESIDENTIAL CARE CENTER** 

614 HART ST

HEATH SPRINGS, SC 29058-8411 FACILITY #:803-273-3227

BARNES, SUSAN PH#: 803-273-3227

Facility Email: SFBARNES11@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 64

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 64 Resident Rooms: 43

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Beaufort /

CRC-1409 / 11/30/2015

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605 HELENA AID OPCO LLC

**PO BOX 503** 

**HELENA PLACE** 

1624 PARIS AVE OFC

PORT ROYAL, SC 29935-2041 FACILITY #:843-982-0233

FENNELL, ERIC J PH#: 843-982-0233

Facility Email: EFENNELL@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 4 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**HELMS-GORDON RESIDENTIAL CARE HOME** 

714 FUNDERBURKE RD

FORT LAWN, SC 29714-8593 FACILITY #:803-872-4253

GORDON, MELISSA K PH#: 803-872-4253 Facility Email: MKGORDON@COMPORIUM.NET Fac. Cont. Email: No Facility Contact Email on Record Chester / Sole Proprietorship

**PO BOX 188** 

FORT LAWN, SC 29714-0188 MELISSA, KAYE GORDON

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 32

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 32 Resident Rooms: 16

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CRC-0527 / 07/31/2015 (Renewal Pending)

HERITAGE AT LOWMAN RESIDENTIAL CARE

2101 DUTCH FORK RD

CHAPIN, SC 29036 FACILITY #:803-732-8800

YETTER, MELISSA T PH#: 803-732-8800

Facility Email: MYETTER@LHOMES.ORG Fac. Cont. Email: MYETTER@LHOMES.ORG

Alzheimer Care: Yes

Max # Residents: 48

Alzheimer Unit: Yes Max # Beds: 48 CRC-0840 / 09/30/2016

Richland / Non-Profit Corporation

PO BOX 444

WHITE ROCK, SC 29177-0444

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

**Total Number of Licensed Beds: 132** 

Resident Beds: 132 Resident Rooms: 132

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

HERRIOTT'S RESIDENTIAL CARE FACILITY

114 LIME LN

SUMTER, SC 29150-6630 FACILITY #:803-773-6882

YORK-HERRIOTT, LUCINDA PH#: 803-773-6882

Facility Email: LHERRIOTT@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1013 / 06/30/2016 Sumter / Partnership

114 LIME LN

SUMTER, SC 29150-6630

JOHN & LUCINDA HERRIOTT

Alzheimer Care: Yes Max # Residents: 2 **Total Number of Licensed Beds** 14

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 14 **Resident Rooms:** 7

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

HILL COMMUNITY CARE FACILITY

1529 DIXON RD

ELGIN, SC 29045-8957 FACILITY #:803-408-1346

HILL, ALICE F PH#: 803-408-1346

CFB1920@BELLSOUTH.NET Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds: 10

CRC-1152 / 04/30/2016

2326 LOCUST RD

Kershaw / Sole Proprietorship

COLUMBIA, SC 29223-3835

Resident Beds: 10 Resident Rooms: 6 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0

ALICE F HILL

Other Rooms:

0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1121 / 09/30/2016

3215 WISE CREEK LN

AIKEN, SC 29801-2534 MARRINSON GROUP INC

Aiken / Corporation

HILLS OF CUMBERLAND VILLAGE

3215 WISE CREEK LN

AIKEN, SC 29801-2534 FACILITY #:803-641-8444

NEAL, ELIZABETH H PH#: 803-641-8444 Facility Email: LNEAL@MARRINSON.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 4

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 34

Resident Beds: 34 Resident Rooms: 24 Staff Beds: 0 Staff Rooms: 0 0

Other Beds: 0 Other Rooms:

HITCHCOCK PLACE

102 CREPE MYRTLE DR OFC

AIKEN, SC 29803-7552 FACILITY #:803-649-6439

SARAH, LEVASSEUR PH#:

Facility Email: FDRAWDY@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 4

Alzheimer Unit: No Max # Beds: 0

CRC-1412 / 11/30/2015

Aiken /

330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 HITCHCOCK AID OPCO LLC

Total Number of Licensed Beds: 44

Resident Beds: 44 Resident Rooms: 39 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**HOUSE ON CHARLOTTE** 

442 E CHARLOTTE AVE

SUMTER, SC 29150-3670 FACILITY #:803-883-4046

BURGESS, GLORIA F PH#: 803-883-4046

Facility Email: SENIORS@LIFELINESENIORSERVICES.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1531 / 12/31/2015 Sumter / Corporation

LIFELINE SENIOR SERVICES INC

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

**Resident Beds:** 4 Resident Rooms: 2 Staff Beds: 0 Staff Rooms: 0

Other Beds: Other Rooms: 0 0

**IDA LANE I CRCF** 

120 IDA LN

COLUMBIA, SC 29203-9234 FACILITY #:803-786-7522

HAYES, KESH PH#: 803-786-7543

BHARRIS@BABCOCKCENTER.ORG Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Alzheimer Unit: No Max # Beds: 0

CRC-1520 / 03/31/2016

Richland /

BABCOCK CENTER INC

**Total Number of Licensed Beds** 

**Resident Beds:** 8 Resident Rooms: 8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**IDA LANE II CRCF** 

CRC-1518 / 12/31/2015

**124 IDA LN** 

Richland /

COLUMBIA, SC 29203-9234 FACILITY #:803-786-7543

HAYES, KESH PH#: 803-786-7543

BHARRIS@BABCOCKCENTER.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

BABCOCK CENTER INC

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 8

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: 0

Other Beds: 0

CRC-1383 / 04/30/2016

Cherokee / Ltd. Liability

CRC-1094 / 05/31/2016

604 WAGON WHEEL RD

THELMA S MYERS

Hampton / Sole Proprietorship

HAMPTON, SC 29924-5346

GAFFNEY, SC 29341-2841

483 LOCKHART LN

IVORY'S LOVING CARE RESIDENTIAL FACILITY

2827 SPRUILL AVE Charleston / Partnership

NORTH CHARLESTON, SC 29405-8050 FACILITY #:843-745-2339 2827 SPRUILL AVE

SANDERS, JUANITA PH#: 843-270-0787 Facility Email: SISTERSANDERS@KNOLOGY.NET

Fac. Cont. Email: SISTERSANDERS@BELLSOUTH.NET

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 7

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 7 Resident Rooms: 4

Staff Beds: 2 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

CRC-1458 / 10/31/2014 (Renewal Pending)

HARMONY RESIDENTIAL CARE CENTER LLC

NORTH CHARLESTON, SC 29405-8050

JUANITA SANDERS & GENEVA NELSON

IVY GROVE RESIDENTIAL CARE CENTER

483 LOCKHART LN

Alzheimer Care: Yes

GAFFNEY, SC 29341-2841 FACILITY #:864-487-0869

MELEKWE, OBIAJULU E PH#: 864-487-0869

Facility Email: OSKARMANI@AOL.COM Fac. Cont. Email: OSKARMANI@AOL.COM

> Max # Residents: 10 **Total Number of Licensed Beds** 62

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 62 Resident Rooms: 34

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

J & T RESIDENTIAL CARE FACILITY

604 WAGON WHEEL RD

HAMPTON, SC 29924-5346 FACILITY #:803-943-7177

HAMILTON, DA'ASIA S PH#: 803-943-7177 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 10 Total Number of Licensed Beds: 10

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 10 Resident Rooms: 6

Staff Beds: 3 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1181 / 09/30/2016

PO BOX 1382

ANNA L OWENS

Kershaw / Sole Proprietorship

J C LARAES SOUTHWINDS ASSISTED LIVING COMMUNITY

308 HUMPHRIES RD

RIDGEWAY, SC 29130-9648 FACILITY #:803-438-4052

Max # Residents: 0

OWENS, JUDY W PH#: 803-438-4052

Facility Email: JUDYOWENS53@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 

CRC-0831 / 09/30/2016

PO BOX 204

Orangeburg / Sole Proprietorship

ORANGEBURG, SC 29116-0204

BARBARA W IRICK-BRUNSON

CRC-1248 / 09/30/2015

Lexington / Ltd. Liability

915 HOOK AVE

LUGOFF, SC 29078-1382

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms:

Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

5

J J RESIDENTIAL CARE

Alzheimer Care: No

748 GREEN ST

ORANGEBURG, SC 29115-4805 FACILITY #:803-539-2604

IRICK-BRUNSON, BARBARA W PH#: 803-539-2604

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

JENNI-LYNN ASSISTED LIVING COMMUNITY

915 HOOK AVE

WEST COLUMBIA, SC 29169-5332 FACILITY #:803-926-8600

HAYES, KESHA L PH#: 803-926-8600

Facility Email: KHAYES@JENNILYNNSENIORLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 63

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 63 Resident Rooms: 53

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GEORGETOWN, SC 29442-1471

WEST COLUMBIA, SC 29169-5332

JENNI-LYNN ASSISTED LIVING LLC

JESSAMINE COMMUNITY RESIDENCE

143 JESSAMINE AVE

GEORGETOWN, SC 29440-5837 FACILITY #:843-527-1390

RANDOLPH, STACEY PH#: 843-527-1390

Facility Email: SANTLEY@GCBDSN.COM

Fac. Cont. Email: SANTLEY@GCBDSN.COM

Alzheimer Care: No Max # Residents: 0

Total Number of Licensed Beds 8

CRC-1445 / 06/30/2016

Georgetown / County

PO BOX 1471

**NEEDS** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 4
Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0932 / 06/30/2016

JOANNE M CALDWELL

PO BOX 23494

Richland / Sole Proprietorship

COLUMBIA, SC 29224-3494

JOANNE'S COMMUNITY CARE HOME #1

5048 PERCIVAL RD

ELGIN, SC 29045-9156 FACILITY #:803-736-3860

CALDWELL, JOANNE M PH#: 803-736-3860

Facility Email: JOANNESCCH@AOL.COM

Fac. Cont. Email: JOANNESCCH@AOL.COM

Total Number of Licensed Beds 10

CRC-0030 / 03/31/2016

JOANNE M CALDWELL

CRC-1530 / 11/30/2015

Florence / Ltd. Liability

PO BOX 1118

PO BOX 23494

Richland / Sole Proprietorship

COLUMBIA, SC 29224-3494

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 0 Other Rooms: 0

Other Beds:

JOANNE'S COMMUNITY CARE HOME II

756 FARROWOOD DR

Alzheimer Care: Yes

COLUMBIA, SC 29223-7801 FACILITY #:803-736-3094

PH#:

Facility Email: JOANNESCCH@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 0 **Total Number of Licensed Beds** 

Max # Residents: 2

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 9 Resident Rooms: 5

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

JOHNSONVILLE ADULT CARE SERVICES LLC

JOHNSONVILLE ADULT CARE SERVICES

351 S MIDWAY HWY

JOHNSONVILLE, SC 29555-6242 FACILITY #:843-380-0777

ROBINSON, RHONDA H PH#: 843-380-0777

Facility Email: JADC2011@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 3 **Total Number of Licensed Beds** 22

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 22 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Orangeburg / Sole Proprietorship

ORANGEBURG, SC 29116-1465

CRC-0332 / 11/30/2015

PO BOX 1465

LYNN P SMITH

JOHNSONVILLE, SC 29555-1118

JOLLY REST MORE

1488 GLOVER ST

ORANGEBURG, SC 29115-6095 FACILITY #:803-531-4386

MOORE, DAVENE M PH#: 803-531-4386

JOLLYRESTMORE@AOL.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 10

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 10 Resident Rooms: 3

Staff Beds: 4 Staff Rooms: 3 Other Beds: 0 Other Rooms: 0

0

0

#### **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0659 / 02/29/2016

PO BOX 159

Fairfield / Non-Profit Corporation

RIDGEWAY, SC 29130-0159 JOSHUA'S FOUNDATION INC

JOSHUAS FOUNDATION

388 ELBOW CIR

RIDGEWAY, SC 29130 FACILITY #:803-337-8701

WOOD, EDNA S PH#: 803-337-8701 Facility Email:

Fac. Cont. Email: RIDEDNA@TRUVISTA.NET

RIDEDNA@TRUVISTA.COM

Alzheimer Care: No Alzheimer Unit: No

JOSIE DRIVE COMMUNITY RESIDENCE

Max # Residents: 0

Max # Beds: 0

Total Number of Licensed Beds 20

Resident Beds: 20 Resident Rooms: Staff Beds: 0 Staff Rooms: Other Rooms:

Other Beds: 0

CRC-1528 / 09/30/2015

Colleton /

210 JOSIE DR WALTERBORO, SC 29488-2791 FACILITY #:843-549-6979

FARMER, THERESA L PH#:

Facility Email: DREDD@COLLETONDSN.ORG

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 8

**Resident Beds:** 8 Resident Rooms: 4 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

COLLETON COUNTY BOARD OF DISABILITIES AND SPECIAL NEEDS

JOY COMMUNITY CARE HOME

6800 DOBY DR

COLUMBIA, SC 29203-5133 FACILITY #:803-754-3157

DOUGLAS, JONATHAN PH#: 803-754-3157

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0961 / 11/30/2015

Richland / Sole Proprietorship

PO BOX 25215

COLUMBIA, SC 29224-5215

**DEBORAH A SCOTT** 

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 **Resident Rooms:** 4

> Staff Beds: 1 Staff Rooms: 1 Other Beds: Other Rooms: 0 0

JOY'S RESIDENTIAL CARE FACILITY

294 HWY 28 BYP

ABBEVILLE, SC 29620-5541 FACILITY #:864-302-9202

PH#:

Facility Email: JOYT2007@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 5

Alzheimer Unit: No Max # Beds: 0

CRC-1098 / 06/30/2016 Abbeville / Corporation 294 HWY 28 BYP

ABBEVILLE, SC 29620-5541

ABBEVILLE RESIDENTIAL CARE FACILITY INC

**Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 5 3 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

**KENSINGTON I** 

100 KENSINGTON RD

COLUMBIA, SC 29203-5451 FACILITY #:843-623-9016

RICHARDS, ANGELA PH#: 803-256-0504

Facility Email: No Facility Email on Record

Fac. Cont. Email: CWRIGHT@BABCOCKCENTER.ORG

CRC-1532 / 06/30/2016 Richland / County 1224 EAST BLVD

CHESTERFIELD, SC 29709-5148

CHESCO SERVICES

CRC-1536 / 11/30/2015

CRC-1460 / 11/30/2015

475 ROCHESTER HWY

SENECA, SC 29672-2475

INN AT SENECA AID OPCO LLC

Oconee / Ltd. Liability

Richland / State

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 0

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

R

KENSINGTON II GROUP HOME

120 KENSINGTON RD

COLUMBIA, SC 29203-5451 FACILITY #:843-623-9016

TURNER, SUSAN PH#:

Facility Email: S.TURNER@CHESCOSERVICES.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 0 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

**KEOWEE PLACE** 

475 ROCHESTER HWY

SENECA, SC 29672 FACILITY #:864-886-0070

WILLIAMS, CHERYL PH#:

Facility Email: JKRESL@ENLIVANT.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 8 Total Number of Licensed Beds 50

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 50 Resident Rooms: 40

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Richland / Corporation

COLUMBIA, SC 29201-2344

1823 GADSDEN ST

**KIVA LODGE** 

200 CLAUDE BUNDRICK RD

BLYTHEWOOD, SC 29016-9420 FACILITY #:000-000-0000

ROUSE, MATRISE PH#:

Facility Email: JJAY@MHA-SC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 5

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CRC-1092 / 07/31/2015 (Renewal Pending)

MENTAL HEALTH AMERICA OF SOUTH CAROLINA

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

Saluda / Partnership

924 BARR WOODS RD

CRC-1426 / 02/28/2016

Berkeley / Ltd. Liability

CROSS, SC 29436-3339

CRC-1449 / 07/31/2016

CONWAY, SC 29527-5842

Horry / County

408 WEBB ST

L & M RESIDENTIAL HCF LLC

2504 HWY 311

SALUDA, SC 29138-8191

LESA L BLEDSOE & FAYE LONG

L & B CARE HOME

924 BARR WOODS RD

Alzheimer Care: No

SALUDA, SC 29138-8191 FACILITY #:864-445-2494

BLEDSOE, LESA L PH#: 864-445-2494

LBCAREHOME@EMBARQMAIL.COM Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

> Max # Residents: 0 Total Number of Licensed Beds 24

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 24 Resident Rooms: 10

> Staff Beds: 3 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

CRC-0530 / 07/31/2015 (Renewal Pending)

L & M RESIDENTIAL HEALTH CARE FACILITY

2504 HWY 311

CROSS, SC 29436-3339 FACILITY #:843-753-7098

TAYLOR, LINDA B PH#: 843-753-7098 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 5 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

LADIES COMMUNITY RESIDENCE

408 WEBB ST

CONWAY, SC 29527-5842 FACILITY #:843-349-7271

SANTANGELO, ANGELA PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 4

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LADSON'S RESIDENTIAL HOME CARE

1116 CAMP RD

CHARLESTON, SC 29412-8831 FACILITY #:843-762-6443

LADSON, PAULINE M PH#: 843-406-0775 PAULINELADSON@ATT.NET Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1256 / 09/30/2015

Charleston / Sole Proprietorship

1116 CAMP RD

CHARLESTON, SC 29412-8831

PAULINE LADSON

**Total Number of Licensed Beds**:

5 Resident Rooms: **Resident Beds:** 3 Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1241 / 01/31/2016

4877 CHARLOTTE HWY

CRC-1116 / 08/31/2016

Georgetown / Ltd. Liability

38 LAKES AT LITCHFIELD DR

LITCHFIELD RETIREMENT LLC

CRC-0086 / 04/30/2016

320 CAMP RD

Oconee / Non-Profit Corporation

WALHALLA, SC 29691-4811

**Total Number of Licensed Beds** 19

CRC-0690 / 09/30/2016

CHARLESTON, SC 29413-2708

Charleston / State

PO BOX 22708

LAKEVIEW ASSISTED LIVING INC

PAWLEYS ISLAND, SC 29585-5768

CLOVER, SC 29710-8096

LSREF GOLDEN OPS 14 (SC) LLC

York / Limited Liability

LAKE WYLIE ASSISTED LIVING COMMUNITY

4877 CHARLOTTE HWY

CLOVER, SC 29710-8096 FACILITY #:803-831-9900

MCCUIN, KRISTI E PH#: 803-366-1189

Facility Email: KMCCUIN@SENIORLIFESTYLE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 110

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 110 Resident Rooms: 100

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

120 LAKES AT LITCHFIELD DR

LAKES AT LITCHFIELD ASSISTED LIVING

PAWLEYS ISLAND, SC 29585-5515 FACILITY #:843-235-9393

RICHARDSON, JACQUE W PH#: 843-235-9393

Facility Email: JRICHARDSON@LAKES-LITCHFIELD.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 11 **Total Number of Licensed Beds** 79

Alzheimer Unit: Yes Max # Beds: 11 Resident Beds: 79 Resident Rooms: 61

Staff Beds: 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

LAKEVIEW ASSISTED LIVING

Alzheimer Care: Yes

320 CAMP RD

WALHALLA, SC 29691-4811 FACILITY #:864-638-5212

WAITE, SUSAN PH#: 864-638-5212

Facility Email: HARDY@SENIORSOLUTIONS-SC.ORG Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Unit: No Max # Beds: 0

Resident Beds: 19 Resident Rooms: 14 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LAMBS ROAD COMMUNITY RESIDENCE

4788 LAMBS RD

Max # Residents: 2

NORTH CHARLESTON, SC 29418-3521 FACILITY #:843-767-1066

JOHNSTON, GLORIA J PH#: 843-767-1066

DGOLDMINTZ@DSNCC.COM Facility Email:

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Rooms: **Resident Beds:** 8 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

DISABILITIES BOARD OF CHARLESTON COUNTY

0

0

4

0

35

4

0

39

0

0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1507 / 08/31/2016

Spartanburg / State

CHARLES LEA CENTER

LANDRUM COMMUNITY RESIDENCE I

722 BOMAR AVE

LANDRUM, SC 29356 FACILITY #:864-585-0322

DENDY, BERNADETTE C PH#:

JBERNARD@CHARLESLEA.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds Resident Beds:** 8

Staff Beds: Other Beds:

0 0

CRC-1508 / 08/31/2016

Spartanburg / State

Staff Rooms: Other Rooms:

Resident Rooms:

LANDRUM COMMUNITY RESIDENCE II

722 BOMAR AVE

LANDRUM, SC 29356 FACILITY #:864-585-0322

DENDY, BERNADETTE C PH#:

Facility Email: KLIBBY@CHARLESLEA.ORG

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

**Total Number of Licensed Beds Resident Beds:** 8 Resident Rooms:

Staff Beds:

Other Beds:

CHARLES LEA CENTER

0 0

**Staff Rooms:** Other Rooms:

LANGIT'S ASSISTED LIVING FACILITY

1273 REMOUNT RD

NORTH CHARLESTON, SC 29406-3439 FACILITY #:843-554-1671

LANGIT, CRESENCIA B PH#: 843-554-1671

Facility Email: LANGITSASSISTEDLIVING@COMCAST.NET Fac. Cont. Email: LANGITSASSISTEDLIVING@COMCAST.NET

Alzheimer Care: No Alzheimer Unit: No

Max # Beds: 0

Max # Residents: 0

1273 REMOUNT RD

Charleston / Private

CRC-0861 / 03/31/2016

NORTH CHARLESTON, SC 29406-3439 LANGIT'S RESIDENTIAL HOME CARE INC

**Total Number of Licensed Beds** 70

Resident Beds: 70 Staff Beds: 6 Other Beds:

0

Resident Rooms: Staff Rooms: Other Rooms:

LANGSTON PLACE

939 SPRINGDALE DR

CLINTON, SC 29325-7266 FACILITY #:864-833-0338

BLOCKER, KELLEY PH#:

Facility Email: MMORGAN@ALCCO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Alzheimer Unit: No

Max # Residents: 4 Max # Beds: 0

Laurens /

CRC-1408 / 11/30/2015

330 N WABASH AVE STE 3700 CHICAGO, IL 60611-7605 LANGSTON AID OPCO LLC

Total Number of Licensed Beds: 44

Resident Beds: 44 Resident Rooms: Staff Beds: 0 Other Beds: 0

Staff Rooms: Other Rooms:

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

LAUREL CREST

100 JOSEPH WALKER DR

WEST COLUMBIA, SC 29169-6939 FACILITY #:803-796-0370

ROWLETTE-CARTER, CASSANDRA N PH#: 803-796-0370

S.BUKOSKEY@LAUREL-CRESTCOM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0829 / 09/30/2015

Lexington / Non-Profit Corporation

100 JOSEPH WALKER DR

WEST COLUMBIA, SC 29169-6939

**FPCRC INC** 

Laurens /

LAURENS ESTATES LLC

CRC-0316 / 12/31/2015

CRC-0924 / 05/31/2016

1018 CRYSTAL CLEAR LN HOPKINS, SC 29061-8237

Richland / Partnership

**PO BOX 638** 

Laurens / Non-Profit Corporation

LAURENS, SC 29360-0638

Alzheimer Care: Yes Max # Residents: 6 Total Number of Licensed Beds 26

Alzheimer Unit: Yes Max # Beds: 6 Resident Beds: 26 Resident Rooms: 22

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > CRC-0681 / 05/31/2015 (Renewal Pending)

**LAURENS ESTATES** 

2841 BYPASS 127

LAURENS, SC 29360-8332

MCDANIEL, SHEILA L PH#: 864-984-8001

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 Total Number of Licensed Beds: 34

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 34 Resident Rooms: 16

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

LAURENS MEMORIAL HOME FOR AGED

3744 TORRINGTON RD

LAURENS, SC 29360-0638 FACILITY #:864-682-2322

PENLAND, CAROLYN B PH#: 864-682-2322

Facility Email: CPENLAND@PRTCNET.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2 **Total Number of Licensed Beds** 50

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 50 **Resident Rooms:** 43

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LAURENS MEMORIAL HOME FOR AGED INC

LEMONAIDE HOUSE

1018 CRYSTAL CLEAR LN

HOPKINS, SC 29061-8237 FACILITY #:803-776-1742

ETHERIDGE, LULA J PH#: 803-776-1742

LEMONS2LOVE@AOL.COM Facility Email:

Fac. Cont. Email: LYMINAIDE@AOL.COM

Alzheimer Care: Yes Max # Residents: 1 Total Number of Licensed Beds: 15

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 15 Resident Rooms: 7

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

LULA J ETHERIDGE AND NANCY A SMITH

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

LENEVAR COMMUNITY RESIDENCE

1435 W LENEVAR DR

CHARLESTON, SC 29407-5118 FACILITY #:843-766-3061

JOHNSTON, GLORIA J PH#: 843-766-3061

Facility Email: DGOLDMINTZ@DSNCC.COM

Fac. Cont. Email: DGOLDMINTZ@DSNCC.COM

CRC-0943 / 07/31/2016

Charleston / State

PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 4

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

LOIS EARGLE HOME

406 WEBB ST

CONWAY, SC 29527-5842 FACILITY #:843-349-7272

SANTANGELO, ANGELA PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 **Alzheimer Care: No** 

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds** 

CRC-0592 / 05/31/2016

SALUDA, SC 29138-8972

Saluda / Corporation

1280 DENNY HWY

CONWAY, SC 29527-5842

CRC-1450 / 06/30/2016

Horry / County

406 WEBB ST

**Resident Beds:** 8 **Resident Rooms:** 4 Staff Beds: 0 **Staff Rooms:** 0

HORRY COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Other Beds: 0 Other Rooms: 0

LONG'S RESIDENTIAL CARE CENTER

1280 DENNY HWY

SALUDA, SC 29138-8972 FACILITY #:864-445-7901

LONG, MARY J PH#: 864-445-7901

Facility Email: LONGSRESIDENTIAL@YMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Max # Residents: 6

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 32

CRC-0797 / 10/31/2015

Resident Beds: 32 Resident Rooms: 15

LONG'S RESIDENTIAL CARE CENTER INC

Staff Beds: 2 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

LONGWOOD PLANTATION

1687 LONGWOOD DR ORANGEBURG, SC 29118-2307 FACILITY #:803-535-0250

FOWLER, JOSEPH C PH#: 803-535-0250

CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO Facility Email:

LONGWOOD PLANTATION-FHE LLC

Orangeburg / Limited Liability

Fac. Cont. Email: CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO

Alzheimer Care: Yes Max # Residents: 16

Alzheimer Unit: Yes Max # Beds: 16 Total Number of Licensed Beds: 42

Resident Beds: 42 Resident Rooms: 30 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms:

0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1474 / 04/30/2016

Bamberg / Limited Liability

EHRHARDT, SC 29081-0116 LOW COUNTRY ASSISTED LIVING LLC

LOW COUNTRY ASSISTED LIVING

6060 EHRHARDT RD

LOW COUNTRY HOME

EHRHARDT, SC 29081 FACILITY #:803-267-2222

HIERS, BARBARA M PH#: 803-267-2222 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 5

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: 0

Other Beds: 0

**PO BOX 116** 

CRC-1353 / 03/31/2016

204 MENDENHALL ST

SUMMERVILLE, SC 29483-5288

RAINBOW RESIDENTIAL HOME LLC

105 MCKNIGHT ST Berkeley / Ltd. Liability

MONCKS CORNER, SC 29461-4010 FACILITY #:843-899-6950

BEY, LAILA R PH#: 843-899-6950 Facility Email: LBEY1@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 3

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**LOW COUNTRY HOME #2** CRC-1496 / 10/31/2013 (Renewal Pending)

1005 COOPER STORE RD Berkeley / Ltd. Liability

MONCKS CORNER, SC 29461-8317 FACILITY #:843-899-8385

BEY, LAILA R PH#: 843-873-1557

Facility Email: LBEYL@AOL.COM RAINBOW RESIDENTIAL HOME LLC

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 2 Alzheimer Care: Yes **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 5 Resident Beds: **Resident Rooms:** 3

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > Marion / Sole Proprietorship

FLORENCE, SC 29502-6023

PO BOX 6023

BURGESS, SANDI M

M & M RESIDENTIAL CARE HOME

408 HOLIDAY ST

MARION, SC 29571-4416 FACILITY #:843-423-0120

PH#:

Facility Email: SANDYBURGESS98@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 5 Resident Rooms: **Resident Beds:** 3

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

CRC-1379 / 08/31/2015 (Renewal Pending)

# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**MAGNOLIAS OF EASLEY** 

123 COUCH LN

EASLEY, SC 29642-1916 FACILITY #:864-859-3303

CINTRON, CONNIE S PH#: 864-859-3303

CCINTRON@MAGNOLIASEASLEY.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1274 / 01/31/2016

Pickens /

123 COUCH LN

EASLEY, SC 29642-1916

CARE RSL EASLEY OPCO LLC

0

Total Number of Licensed Beds 56

Resident Beds: 56 Resident Rooms:

> 0 Staff Rooms:

0 Other Rooms: 0

MAGNOLIAS OF GAFFNEY ASSISTED LIVING COMMUNITY

101 PARK CT

GAFFNEY, SC 29341 FACILITY #:864-206-0006

WISE, BONITA D PH#: 864-206-0006

Facility Email: BWISE@MAGNOLIASGAFFNEY.COM

Fac. Cont. Email: BWISE@MAGNOLIASGAFFNEY.COM

Alzheimer Care: Yes Max # Residents: 24

Alzheimer Unit: Yes Max # Beds: 24 CRC-1281 / 01/31/2016

Cherokee / Ltd. Liability

CARE RSL GAFFNEY OPCO LLC

Total Number of Licensed Beds 90

Staff Beds:

Other Beds:

Resident Beds: 90 Resident Rooms: 62 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

**MAGNOLIAS OF MYRTLE BEACH** 

601 65TH AVE N

MYRTLE BEACH, SC 29572-3532 FACILITY #:843-692-2330

GRAHAM, DENISE J PH#: 843-692-2330

Facility Email: DENISEJGRAHAM@YAHOO.COM

Fac. Cont. Email: DODENICNAT@YAHOO.COM

CRC-1415 / 05/31/2016 Horry / Ltd. Liability

6309 HAWTHORNE LN

MYRTLE BEACH, SC 29572-3255

CAROLINA RETIREMENT SERVICES OF MYRTLE BEACH LLC

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 48

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 48 Resident Rooms: 37

> Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

**MAGNOLIAS OF SANTEE** 

118 BRITAIN ST

SANTEE, SC 29142-8922 FACILITY #:803-854-2020

WILLIS, TAMMY S PH#: 803-854-2020

Facility Email: MAGNOLIAS.OFSANTEE@NTINET.COM Fac. Cont. Email: MAGNOLIAS.OFSANTEE@NTINET.COM

Alzheimer Care: Yes

CRC-1416 / 05/31/2016 Orangeburg / Ltd. Liability

118 BRITAIN ST

SANTEE, SC 29142-8922

CAROLINA RETIREMENT SERVICES OF SANTEE LLC

Max # Residents: 16 Total Number of Licensed Beds: 44

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 44 Resident Rooms: 31 Staff Beds: 0 Staff Rooms:

0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

**MAGNOLIAS OF SUMMERVILLE** 

335 MIDLAND PKWY

SUMMERVILLE, SC 29485-8138 FACILITY #:843-821-4122

REINHEIMER, CINDY PH#: 843-821-4122

Facility Email: CINDY@MAGNOLIASOFSUMMERVILLE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Dorchester / Ltd. Liability
335 MIDLAND PKWY

CRC-1407 / 11/30/2015

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

MANNING AID OPCO LLC

CRC-0819 / 05/31/2016

Anderson / Corporation

HONEA PATH, SC 29654-1335

224 WILDWOOD DR

MAPLE MANOR INC

Greenville /

CRC-1414 / 03/31/2016

SUMMERVILLE, SC 29485-8138

CAROLINA RETIREMENT SERVICES OF SUMMERVILLE LLC

Alzheimer Care: Yes Max # Residents: 5 Total Number of Licensed Beds 60

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 60 Resident Rooms: 50

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MANNING PLACE

10 COMPANION CT

GREER, SC 29651-1288 FACILITY #:864-989-0707 MORGAN, MARY ADDISON PH#: 864-989-0707 Facility Email: JHARRIS@ENLIVANT.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 5 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MAPLES OF HONEA PATH

224 WILDWOOD DR

HONEA PATH, SC 29654-1335 FACILITY #:864-369-2000

WILLIS, MARK N PH#: 864-369-2000

Facility Email: WILLISFORHOUSE@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 30 Total Number of Licensed Beds 74

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 74 Resident Rooms: 50

Staff Beds:0Staff Rooms:0Other Beds:0Other Rooms:0

MARANATHA MANOR OF SPARTANBURG

2902 E MAIN ST

SPARTANBURG, SC 29307-1252 FACILITY #:864-579-0086

MAHAFFEY, MARY K PH#: 864-579-0086

Facility Email: MAN0643@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 22

Alzheimer Unit: Yes Max # Beds: 22

CRC-1235 / 12/31/2015 Spartanburg / Corporation

2902 E MAIN ST

SPARTANBURG, SC 29307-1252

MARANATHA MANOR OF SPARTANBURG INC

Total Number of Licensed Beds: 73

Resident Beds: 73 Resident Rooms: 47
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1413 / 05/31/2016

Anderson / Ltd. Liability

2203 MARCHBANKS AVE

ANDERSON, SC 29621-2247

MARCHBANKS ASSISTED LIVING AND MEMORY CARE

2203 MARCHBANKS AVE

Alzheimer Care: No

ANDERSON, SC 29621-2247 FACILITY #:864-231-7786

SWENEY, CYNTHIA J PH#: 864-888-8886

Facility Email: CYNTHIA@MARCHBANKSASSISTEDLIVING.COM

Max # Residents: 0

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 60

CRC-0883 / 08/31/2016

CRC-0937 / 07/31/2016

PARANAL, ROGERIA R

CRC-0772 / 06/30/2016

Charleston / Partnership

CHARLESTON, SC 29415-0037 JESUS N AND WILHELMINA C RELLORA

PO BOX 70037

3117 MEETING STREET RD

York / Non-Profit Corporation

ROCK HILL, SC 29731-6030

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 60 Resident Rooms: 50

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PO BOX 30, YORK COUNTY BOARD OF DSN

YORK COUNTY BOARD OF DISIBALITIES AND SPECIAL NEEDS

CAROLINA RETIREMENT SERVICES OF ANDERSON LLC

MARETT BOULEVARD COMMUNITY RESIDENTIAL CARE FACILITY

1721 MARETT BLVD EXT

**Alzheimer Care: No** 

ROCK HILL, SC 29732-2040 FACILITY #:803-327-9466

MYERS, CHRISTINA L PH#: 803-327-9466

Facility Email: TARD@YORKDSNB.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 Total Number of Licensed Beds 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 8 Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME I

3117 MEETING STREET RD Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-7980 FACILITY #:843-554-8890

PARANAL, ROGERIA R PH#: 843-554-8890

Facility Email: RRPARANAL@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 7

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 7 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

NORTH CHARLESTON, SC 29405-7980

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-B

4583 DURANT AVE, B

NORTH CHARLESTON, SC 29405-5212 FACILITY #:843-566-9864

RELLORA, JESUS N PH#:

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 7

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 7 Resident Rooms: 2

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

0

# **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0774 / 06/30/2016

Charleston / Partnership

CHARLESTON, SC 29415-0037 JESUS N AND WILHELMINA C RELLORA

MARIA'S PRIORITY CARE RESIDENTIAL HOME II-F

4583 DURANT AVE, F

NORTH CHARLESTON, SC 29405-5212 FACILITY #:843-747-9234

RELLORA, JESUS N PH#:

Facility Email: JNAVEARELLORA@NETZERO.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

Resident Beds: 5 Staff Beds: 1

Other Beds:

PO BOX 70037

Resident Rooms: Staff Rooms: 1 0 Other Rooms: 0

MARIA'S PRIORITY CARE RESIDENTIAL HOME III

3115 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980 FACILITY #:843-554-0064

PARANAL, ROGERIA R PH#: 843-554-8890

Facility Email: RRPARANAL@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0938 / 07/31/2016

Charleston / Sole Proprietorship 3115 MEETING STREET RD

NORTH CHARLESTON, SC 29405-7980

PARANAL, ROGERIA R

**Total Number of Licensed Beds** 7

CRC-0863 / 03/31/2016

9 FRAZIER VILLAGE DR

MATTIE L HAYWARD

Beaufort / Sole Proprietorship

BEAUFORT, SC 29906-7959

**Resident Beds:** 7 Staff Beds: 1 Other Beds: 0

Resident Rooms: 3 **Staff Rooms:** 

Other Rooms:

MARQUISE RESIDENTIAL HOME

9 FRAZIER VILLAGE DR

BEAUFORT, SC 29906-7959 FACILITY #:843-846-8417

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Beds: 0

Alzheimer Unit: No

Max # Residents: 0

**Total Number of Licensed Beds** 5

5 Resident Beds: Staff Beds: 2

Resident Rooms: Staff Rooms:

Other Beds:

0

Laurens / Non-Profit Corporation

CRC-0360 / 02/28/2016

1 MARTHA FRANKS DR

LAURENS, SC 29360-1799

Other Rooms:

1 0

3

MARTHA FRANKS BAPTIST RETIREMENT COMMUNITY

1 MARTHA FRANKS DR

LAURENS, SC 29360-1799 FACILITY #:864-984-4541

TURNER III, THOMAS P PH#: 864-675-0220

Facility Email: PFRANKS@SCBMA.COM

Fac. Cont. Email: GREENVILLEBG.ED@SUNRISESENIORLIVING.COM

Alzheimer Care: No Alzheimer Unit: No

September 4, 2015

Max # Residents: 0 Max # Beds: 0

Total Number of Licensed Beds 82

Resident Beds: 82 Staff Beds:

0

Resident Rooms: 81 0

Other Beds: 0 Staff Rooms: Other Rooms:

SOUTH CAROLINA BAPTIST MINISTRIES FOR THE AGING INC

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MARY'S HOME CARE

CRC-1505 / 05/31/2016

Georgetown / Sole Proprietorship

224 WARD LOOP

HEMINGWAY, SC 29554-3415 FACILITY #:843-558-9053

HOLMES, MARY W PH#: 843-546-1032

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

HOLMES, MARY W

Alzheimer Care: Yes Max # Residents: 2

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 5

Resident Beds: 5 Resident Rooms: 5 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0

Other Rooms: 0

MARY'S RESIDENTIAL CARE FACILITY

10425 WILSON BLVD

BLYTHEWOOD, SC 29016-9017 FACILITY #:803-708-1739

SIMMONS, NHAJIYAH RAHESSIA PH#: 803-754-3585

Facility Email: M.BACOTE@HOTMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1501 / 01/31/2016 Richland / Sole Proprietorship

10425 WILSON BLVD

BLYTHEWOOD, SC 29016-9017

BACOTE, MARY

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

**Resident Beds:** 5 Resident Rooms: 4 Staff Beds: 2 **Staff Rooms:** Other Rooms: 0

Other Beds: 0

MARYVILLE COMMUNITY RESIDENCE

2602 OLD CHARLESTON RD

GEORGETOWN, SC 29440-1471 FACILITY #:843-546-7238

RANDOLPH, STACEY PH#: 843-527-1390

Facility Email: SANTLEY@GCBDSN.COM

Fac. Cont. Email: SANTLEY@GCBDSN.COM

CRC-1446 / 06/30/2016 Georgetown / County

PO BOX 1471

GEORGETOWN, SC 29442-1471

GEORGETOWN COUNTY BOARD OF DISABILITIES AND SPECIAL

**NFFDS** 

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds**: R

Resident Beds: 8 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

MASTER CARE

5870 MOOREFIELD MEMORIAL HWY

LIBERTY, SC 29657-9268 FACILITY #:864-878-9926

MASTERS, JIMMY D PH#: 864-878-9926 Facility Email: MASTERCARE178@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 1

Alzheimer Unit: No Max # Beds: 0

CRC-0358 / 02/28/2016 Pickens / Corporation

5870 MOOREFIELD MEMORIAL HWY

LIBERTY, SC 29657-9268

MASTER CARE INC

Total Number of Licensed Beds: 14

**Resident Beds:** 14 Resident Rooms: 9 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0988 / 06/30/2016

2065 MCCRAYS MILL RD

SUMTER, SC 29154-6111

SUMTER AL HOLDINGS LLC

Sumter / Corporation

MCELVEEN MANOR

2065 MCCRAYS MILL RD

SUMTER, SC 29154-6111 FACILITY #:803-778-9690

BENSON, GINGER PH#:

Facility Email: MCELVEENMANOR@SC.RR.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Alzheimer Unit: Yes

Max # Residents: 56

Max # Beds: 56

Total Number of Licensed Beds: 140

Resident Beds: 140 Staff Beds: 0

Other Beds:

0

Resident Rooms: Staff Rooms:

0 Other Rooms: 0

96

0

8

0

0

MCKINNEY HOUSE

307 MILLER RD

MAULDIN, SC 29662-2034 FACILITY #:864-297-5044

TATE, CRYSTAL PH#:

Facility Email: CLT26@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

CRC-0778 / 07/31/2016

Greenville / State 307 MILLER RD

MAULDIN, SC 29662-2034

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

**Total Number of Licensed Beds** 10

**Resident Beds:** 10 Staff Beds: 0 Other Beds: 0

Resident Rooms: 10 **Staff Rooms:** 0

Other Rooms:

MCLEOD MANOR

1707 MCLEOD AVE

CHARLESTON, SC 29412-2922 FACILITY #:843-795-8780

ALSTON, MARTHA S PH#: 843-795-8780 Facility Email: CHVINC@COMCAST.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0425 / 03/31/2015 (Renewal Pending)

Charleston / Corporation 1707 MCLEOD AVE

CHARLESTON, SC 29412-2922

MCLEOD MANOR INC

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 16

Resident Beds: 16 Resident Rooms: 7 Staff Beds: 0 Staff Rooms: 0

Other Rooms: Other Beds: 0 0

MEADOWLARK DRIVE COMMUNITY RESIDENTIAL CARE FACILITY

1183 MEADOWLARK DR

ROCK HILL, SC 29732-7708 FACILITY #:803-327-9770

MYERS, CHRISTINA L PH#: 803-327-9466 Facility Email: CMYERS@YORKDSNB.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0881 / 08/31/2016

York / Non-Profit Corporation

PO BOX 30, YORK COUNTY BOARD OF DSN

ROCK HILL, SC 29731-6030

YORK COUNTY BOARD OF DISIBALITIES AND SPECIAL NEEDS

**Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 8 Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms:

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## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0910 / 05/31/2016

METHODIST OAKS INC

**PO BOX 327** 

Orangeburg / Non-Profit Corporation

ORANGEBURG, SC 29116-0327

METHODIST OAKS RESIDENTIAL CARE FACILITY

1000 METHODIST OAKS DR

ORANGEBURG, SC 29115-1813 FACILITY #:803-534-1212

VALLENTINE, TERESA C PH#: 803-245-4321

Facility Email: No Facility Email on Record

Fac. Cont. Email: TERESA.VALLENTINE@THEOAKSSC.COM

....

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 40

Resident Beds: 40 Resident Rooms: 40 Staff Beds: 0 Staff Rooms: 0

NORTH CHARLESTON, SC 29406-4551

Other Beds: 0 Other Rooms:

CRC-0905 / 01/30/2016

Charleston / Corporation

2712 MIDLAND PARK RD

MIDLAND PARK RESIDENTIAL HOME CARE

2712 MIDLAND PARK RD

**Alzheimer Care: No** 

NORTH CHARLESTON, SC 29406-4551 FACILITY #:843-569-0025

SINGIAN, ROGELIO C PH#: 843-569-0025

Facility Email: MIDLANDPARK@BELLSOUTH.NET

Fac. Cont. Email: RVBALAGTASSC@AOL.COM

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds** 52

MIDLAND PARK ENTERPRISES INC

Resident Beds: 52 Resident Rooms: 27 Staff Beds: 4 Staff Rooms: 2

Other Rooms:

Other Beds: 0

**MIDWAY RESIDENTIAL CARE FACILITY #1** 

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Spartanburg / Corporation
4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721

CRC-0318 / 12/31/2015

MIDWAY RESIDENTIAL CARE FACILITY INC

Total Number of Licensed Beds: 13

CRC-0320 / 12/31/2015

Spartanburg / Corporation

4026 MOORE DUNCAN HWY MOORE, SC 29369-9721

Resident Beds: 13 Resident Rooms: 7

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY #1A

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 14

Resident Beds: 14 Resident Rooms: 7
Staff Beds: 0 Staff Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY INC

Other Beds: 0

Other Rooms:

0

September 4, 2015

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0321 / 12/31/2015

Spartanburg / Corporation

4026 MOORE DUNCAN HWY MOORE, SC 29369-9721

MIDWAY RESIDENTIAL CARE FACILITY #2

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

Max # Residents: 0

GIBSON, STACEY R PH#:

Alzheimer Care: No

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 25

CRC-0346 / 12/31/2015

Spartanburg / Corporation

MOORE, SC 29369-9721

CRC-0322 / 12/31/2015

Spartanburg / Corporation

MOORE, SC 29369-9721

CRC-0616 / 12/31/2015

Spartanburg / Corporation

4026 MOORE DUNCAN HWY MOORE, SC 29369-9721

4026 MOORE DUNCAN HWY

**4026 MOORE DUNCAN HWY** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 25 Resident Rooms: 11

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY INC

Other Beds: 0

MIDWAY RESIDENTIAL CARE FACILITY #3

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 17

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 17 Resident Rooms: 7 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY INC

MIDWAY RESIDENTIAL CARE FACILITY INC

**MIDWAY RESIDENTIAL CARE FACILITY #4** 

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 14

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 14 **Resident Rooms:** 7

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

MIDWAY RESIDENTIAL CARE FACILITY #5

4026 MOORE DUNCAN HWY

MOORE, SC 29369-9721 FACILITY #:864-433-8777

GIBSON, STACEY R PH#:

Facility Email: LCWALKER428@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 12

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 12 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MIDWAY RESIDENTIAL CARE FACILITY INC

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0695 / 12/31/2015

MILES RESIDENTIAL CARE 490 KOON STORE RD

COLUMBIA, SC 29203-9573 FACILITY #:803-754-4039

MILES, BETTY A PH#: 803-754-4039 Facility Email: No Facility Email on Record Fac. Cont. Email: No Facility Contact Email on Record Richland / Partnership 4230 HIGHLAND PARK DR COLUMBIA, SC 29204-1729 BETTY A AND LOUIS B MILES

Alzheimer Care: No

Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 7 Resident Rooms: 4 Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

7

LAURENS COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

MILL STREET COMMUNITY RESIDENCE

415 MILL ST

LAURENS, SC 29360-1905 FACILITY #:864-984-3506

MERCER, PHYLLIS D PH#: 864-984-3506 Facility Email: DMERCER@LCDSND.ORG

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

LAURENS, SC 29360-0986

CRC-1419 / 12/31/2015

PO BOX 986

Laurens / Non-Profit Corporation

**Total Number of Licensed Beds Resident Beds:** 8 Resident Rooms:

CRC-0897 / 11/30/2015

140 COX ST

MILLER PLACE LLC

Spartanburg / Limited Liability

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

MILLER'S PLACE

**140 COX ST** 

SPARTANBURG, SC 29306-4807 FACILITY #:864-573-7008

MILLER, ANNIE M PH#: 864-573-7008

Facility Email: JACKIEMILLER231@YAHOO.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

SPARTANBURG, SC 29306-4807

**Total Number of Licensed Beds** 19 Resident Beds: 19 Resident Rooms: 9

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

MIRCI GROUP HOME I

581 BECKMAN DR

COLUMBIA, SC 29203-3207 FACILITY #:803-754-4221

PH#:

Facility Email: BEVANS@MIRCI. ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 PO BOX 4246 COLUMBIA, SC 29240-4246

CRC-1443 / 06/30/2016

Richland / Corporation

MENTAL ILLNESS RECOVERY CENTER INC

**Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 6 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1444 / 06/30/2016

Richland / Corporation

PO BOX 4246

MIRCI GROUP HOME II 611 BECKMAN RD

COLUMBIA, SC 29203-3282 FACILITY #:803-754-8894

PH#:

BEVANS@MIRCI. ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

COLUMBIA, SC 29240-4246

Resident Beds: 6 Resident Rooms: 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MENTAL ILLNESS RECOVERY CENTER INC

MONTROSE MANOR

80 MEDICAL CENTER DR

WOODRUFF, SC 29388-8781 FACILITY #:864-476-9100

KOESTER, KELLY H PH#: 864-444-0082

Facility Email: MONTROSEMANORALF@GMAIL.COM Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1417 / 12/31/2015

Spartanburg /

LAKEFIELD PROPERTIES LLC

**Total Number of Licensed Beds** 60

Resident Beds: 60 Resident Rooms: 35 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF ANDERSON

1304 MCLEES RD

ANDERSON, SC 29621-3345 FACILITY #:864-964-9088

SPEER, RICHARD W PH#: 864-964-9088 Facility Email: RSPEER@5SQC.COM Fac. Cont. Email: RSPEER@5SQC.COM

CRC-1093 / 04/30/2016

Anderson / Limited Liability Limited Partnership

1304 MCLEES RD

ANDERSON, SC 29621-3345 MORNINGSIDE OF ANDERSON LP

Alzheimer Care: Yes

Max # Residents: 15

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 88

Resident Beds: 88 **Resident Rooms:** 44 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF BEAUFORT

109 OLD SALEM RD

BEAUFORT, SC 29902-5113 FACILITY #:843-982-0220

SIEGNER, TAMATHE J PH#: 843-982-0220 TSIEGNER@5SQC.COM Facility Email: Fac. Cont. Email: TSIEGNER@5SQC.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

CRC-1267 / 06/30/2016 Beaufort / Ltd. Liability 109 OLD SALEM RD

BEAUFORT, SC 29902-5113 MORNINGSIDE OF BEAUFORT LLC

Total Number of Licensed Beds 49

Resident Beds: 49 Resident Rooms: 37 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1259 / 01/31/2016

Kershaw / Ltd. Liability

715 KERSHAW HWY

CAMDEN, SC 29020-1634

CRC-1102 / 05/31/2016

CRC-1088 / 04/30/2016

116 ENTERPRISE CT

CRC-1099 / 06/30/2016

Darlington / Ltd. Liability

1901 W CAROLINA AVE HARTSVILLE, SC 29550-4701

MORNINGSIDE OF HARTSVILLE LLC

GREENWOOD, SC 29649-1666

MORNINGSIDE OF GREENWOOD LP

GEORGETOWN, SC 29440-6946

MORNINGSIDE OF SOUTH CAROLINA LP

2628 N FRASER ST

MORNINGSIDE OF CAMDEN LLC

MORNINGSIDE OF CAMDEN

715 KERSHAW HWY

Alzheimer Care: No

CAMDEN, SC 29020-1634 FACILITY #:803-713-8668

SELLERS, CRYSTAL J PH#:

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 Total Number of Licensed Beds 49

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 49 Resident Rooms: 40

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > Georgetown / Limited Liability Limited Partnership

Greenwood / Limited Liability Limited Partnership

MORNINGSIDE OF GEORGETOWN

2628 N FRASER ST

GEORGETOWN, SC 29440-6946 FACILITY #:843-520-0319

WEAVER, ANITA N PH#: 843-520-0319 Facility Email: AWEAVER@5SQC.COM

Fac. Cont. Email: AWEAVER@5SQC.COM

Alzheimer Care: Yes Max # Residents: 30 **Total Number of Licensed Beds** 59

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 59 Resident Rooms:

50 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF GREENWOOD

116 ENTERPRISE CT

GREENWOOD, SC 29649-1666 FACILITY #:864-388-9433

PH#:

Facility Email: KAMERSON@5SSL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 49

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 49 **Resident Rooms:** 44

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF HARTSVILLE

1901 W CAROLINA AVE

HARTSVILLE, SC 29550-4701 FACILITY #:843-857-0159

JONES, DAVID G PH#: 843-857-0159 Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 10 Total Number of Licensed Beds 54

Alzheimer Unit: Yes Max # Beds: 10 Resident Beds: 54 **Resident Rooms:** 50

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

MORNINGSIDE OF LANCASTER

1004 HARDIN ST

LANCASTER, SC 29720-1609 FACILITY #:803-285-8152

HODGIN, PAIGE L PH#: 803-980-4100

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1146 / 03/31/2016

CRC-1280 / 06/30/2016

Lexington / Ltd. Liability

CRC-1261 / 02/28/2016

2306 RIVERBANK DR

CRC-1114 / 08/31/2016

ROCK HILL, SC 29732-8965

1830 W MAIN ST

Orangeburg / Ltd. Liability

ORANGEBURG, SC 29118-4046

MORNINGSIDE OF ORANGEBURG LLC

LEXINGTON, SC 29072-2030

MORNINGSIDE OF LEXINGTON LLC

218 OLD CHAPIN RD

Lancaster / Limited Liability Limited Partnership

1004 HARDIN ST

LANCASTER, SC 29720-1609

MORNINGSIDE OF SOUTH CAROLINA LP

Alzheimer Care: Yes Max # Residents: 14 Total Number of Licensed Beds 65

Alzheimer Unit: Yes Max # Beds: 14 Resident Beds: 65 Resident Rooms: 52

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF LEXINGTON

218 OLD CHAPIN RD

LEXINGTON, SC 29072-2030 FACILITY #:803-957-3600

LYON, RICHARD PH#: 803-957-3600

Facility Email: FELLROTT@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 49

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 49 Resident Rooms: 44
Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

MORNINGSIDE OF ORANGEBURG

2306 RIVERBANK DR

ORANGEBURG, SC 29118-4046 FACILITY #:803-539-2911

JOHNSON, JERRI S PH#: 803-539-2911

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: JSJOHNSON@5SQC.COM

Alzheimer Care: Yes Max # Residents: 49 Total Number of Licensed Beds 49

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 49 Resident Rooms: 45

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

York / Limited Liability Limited Partnership

MORNINGSIDE OF SOUTH CAROLINA LP

MORNINGSIDE OF ROCK HILL

**1830 W MAIN ST** 

ROCK HILL, SC 29732-8965 FACILITY #:803-980-4100

PLUMMER, JEFFREY S PH#: 803-980-4100

Facility Email: JPLUMMER@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 60

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 60 Resident Rooms: 49

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

MORNINGSIDE OF SENECA LP

15855 WELLS HWY

SENECA, SC 29678-1078 FACILITY #:864-888-8886

KELLEY, GWENDELL M PH#: 864-888-8886 Facility Email: GKELLEY@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1157 / 05/31/2016

Oconee / Limited Liability Limited Partnership

15855 WELLS HWY SENECA, SC 29678-1078

MORNINGSIDE OF SENECA LP

Total Number of Licensed Beds 59

CRC-1079 / 04/30/2016

SUMTER, SC 29150-1832

CRC-0459 / 02/28/2016

Charleston / Partnership

CHARLESTON, SC 29402-1647

JOSEPHINE STENT & ELOISE CHESTNUT

PO BOX 1647

**PO BOX 358** 

GERMAN GLASSCHO

2500 LIN DO CT

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 59 Resident Rooms: 49

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

Sumter / Limited Liability Limited Partnership

MORNINGSIDE OF SOUTH CAROLINA LP

MORNINGSIDE OF SUMTER

2500 LIN DO CT

SUMTER, SC 29150-1832 FACILITY #:803-469-4490

PH#:

Facility Email: GBROWN@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 55

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 55 Resident Rooms: 49

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

MY FATHER'S HOUSE

22 LARNES ST

CHARLESTON, SC 29403-2636 FACILITY #:843-723-7889

STENT, JOSEPHINE I PH#: 843-723-7889 Facility Email: JSTENT@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 **Resident Rooms:** 4

> Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

> > CRC-1318 / 07/31/2015 (Renewal Pending)

Williamsburg / Sole Proprietorship

GREELEYVILLE, SC 29056-0358

MY HOUSE COMMUNITY HOME

273 MARTIN RD

CADES, SC 29518-3381 FACILITY #:843-382-4223

GLASSCHO, GERMAN PH#: 843-382-3277

NIMC@FTC-I.NET Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 Resident Rooms: **Resident Beds:** 4 2

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0644 / 08/31/2016

Calhoun / Partnership

365 CALDON RD

MYERS RESIDENTIAL CARE FACILITY

365 CALDON RD

Alzheimer Care: No

SWANSEA, SC 29160-9541 FACILITY #:803-568-3582

Max # Residents: 0

MYERS, LOUISE PH#: 803-568-3582

Facility Email: MYERSRCF@PBTCOMM.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Total Number of Licensed Beds** 5

CRC-0851 / 01/31/2016

CRC-1403 / 11/30/2015

3620 HAPPY WOODS CT

CRC-1253 / 01/31/2016

NEWTON, MA 02458-2094 **FS TENANT POOL I TRUST** 

Horry / Corporation

MYRTLE BEACH, SC 29588-2925

Horry / Corporation

CSL LEASECO INC

SWANSEA, SC 29160-9541

LOUISE AND DAVID MYERS JR

Calhoun / Partnership

365 CALDON RD

SWANSEA, SC 29160-9541

LOUISE AND DAVID MYERS JR

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms:

3 Staff Beds: 1 Staff Rooms: 1

Other Beds:

0 Other Rooms: 0

MYERS RESIDENTIAL CARE FACILITY II

365 CALDON RD

SWANSEA, SC 29160-9541 FACILITY #:803-568-3582

MYERS, LOUISE PH#: 803-568-3582

Facility Email: MYERSRCF@PBTCOMM.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 7

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 7 Resident Rooms: 6

Staff Beds: 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

**MYRTLE BEACH ESTATES** 

3620 HAPPY WOODS CT

Alzheimer Care: Yes

MYRTLE BEACH, SC 29588-2925 FACILITY #:843-293-8888

BLAKE, DIANE PH#: 843-293-8888

Facility Email: DLBLAKE@CAPITALSENIORLIVING.NET

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 42 **Total Number of Licensed Beds: 142** 

Alzheimer Unit: Yes Max # Beds: 42 Resident Beds: 142 Resident Rooms: 80

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

MYRTLE BEACH MANOR RETIREMENT COMMUNITY

9547 HWY 17 N

MYRTLE BEACH, SC 29572-0000 FACILITY #:843-449-5283

BEARD, MICHAEL W PH#: 843-449-5283 Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: MBEARD@5SQC.COM

Alzheimer Care: Yes Max # Residents: 0 Total Number of Licensed Beds: 111

Alzheimer Unit: Yes Max # Beds: 30 Resident Beds: 111 Resident Rooms: 111

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

400 CENTRE ST, FIVE STAR QUALITY CARE-LICENSING

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1521 / 04/30/2016

212 MITCHELL BAY LN

PINEVILLE, SC 29468

CRC-0973 / 12/31/2015 Charleston / Partnership

702 E RAILROAD AVE

CRC-0877 / 08/31/2016

CRC-1504 / 04/30/2016

CHESTERFIELD, SC 29709-0151

Richland / County

CHESCO SERVICES

**PO BOX 151** 

SUMMERVILLE, SC 29485-7228

RAVENELL, HELEN W

Berkeley / Sole Proprietorship

**NEW BEGINNINGS OF PINEVILLE** 

212 MITCHELLBAY LN

PINEVILLE, SC 29468-3200 FACILITY #:843-351-2240

RAVENELL, HELEN W PH#: 843-753-7534 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 4 Resident Rooms: 4

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

NICHOLS RESIDENTIAL CARE FACILITY

702 E RAILROAD AVE

LINCOLNVILLE, SC 29485-7228 FACILITY #:843-821-9608

NICHOLS, LAVERNE PH#: 843-821-9608

Facility Email: NICHOLSRESIDENT@KNOLOGY.COM

Fac. Cont. Email: NICHOLSRESIDENTIAL@AOL.COM

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 3 Staff Beds: 1 **Staff Rooms:** 

Other Beds: 0 Other Rooms: 0

NORTH CHARLESTON, SC 29418-5441

NORTH HAVEN RESIDENTIAL CARE HOME INC

ALONZO NICHOLS AND LAVERNE NICHOLS

NORTH HAVEN RESIDENTIAL CARE HOME

4326 LESLIE ST Charleston / Corporation 4326 LESLIE ST

NORTH CHARLESTON, SC 29418-5441 FACILITY #:843-767-2541

LANGIT, LEONORA D PH#: 843-767-2541

Facility Email: NORAALFLLC@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2 **Total Number of Licensed Beds** 16

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 16 Resident Rooms: 8

Staff Beds: 2 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

NORTH PINES COMMUNITY RESIDENCE

313 N PINES RD

BLYTHEWOOD, SC 29016-8788 FACILITY #:803-754-6213

LOCKHART, ELESHA J PH#: 803-783-2381

S.TURNER@CHESCOSERVICES.ORG Facility Email:

Fac. Cont. Email: EJL75@SCDNH.ORG

Alzheimer Care: Yes Max # Residents: 1 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1454 / 10/31/2015

NORTH POINTE ASSISTED LIVING

701 SIMPSON RD

ANDERSON, SC 29621-3077 FACILITY #:864-226-5505 GARRISON, ANDREW HODGE PH#: 864-226-5505

Facility Email: SSTROVALL@CAPITALSENIORLIVING.NET

Fac. Cont. Email: No Facility Contact Email on Record

CSL NORTH POINTE SC LLC

Anderson / Limited Liability

Alzheimer Care: Yes

Max # Residents: 28

Alzheimer Unit: Yes Max # Beds: 28 Total Number of Licensed Beds 70

Resident Beds: 70 Resident Rooms: 41 Staff Beds: 0 Staff Rooms: 0 0 0

Other Beds:

Other Rooms:

NORTHWOODS SENIOR LIVING & MEMORY CARE

1267 N MAIN ST

SUMTER, SC 29153-2138 FACILITY #:803-774-5700

PATTERSON, KALEY PH#: 803-774-5700 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1442 / 05/31/2016

Sumter / Non-Profit Corporation

PO BOX 296

SUMTER, SC 29151-0296

EMPOWERED PERSONAL CARE HOME HEALTH ALLIANCE INC

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 79

Resident Beds: 79 Resident Rooms: 47 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

OAKBRIDGE TERRACE AT PARK POINTE VILLAGE

3025 CHESBROUGH BLVD

ROCK HILL, SC 29732-8078 FACILITY #:803-327-4723

PETTY, JAMES H PH#:

Facility Email: NLATTIMER@ACTSLIFE.ORG Fac. Cont. Email: No Facility Contact Email on Record CRC-1374 / 07/31/2016 York / Non-Profit Corporation

3025 CHESBROUGH BLVD ROCK HILL, SC 29732-8078

PARK POINTE VILLAGE INC

Alzheimer Care: Yes

Max # Residents: 7

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 20

Resident Beds: 20 Resident Rooms: 20 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds:

0

0

OAKLEAF VILLAGE AT THORNBLADE

1560 THORNBLADE BLVD

GREER, SC 29650-4520 FACILITY #:864-968-1277

WOOLLEY, KATHRYN D PH#: 864-968-1277

KWOOLLEY@ROYALGREENVILLE.COM Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Max # Residents: 19

Alzheimer Unit: Yes Max # Beds: 24 CRC-1330 / 04/30/2016

Greenville / Ltd. Liability 1560 THORNBLADE BLVD GREER, SC 29650-4520

RSC GREENVILLE LLC

Total Number of Licensed Beds: 100

Resident Beds: 100 Resident Rooms: 90 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

#### **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1329 / 04/30/2016

Lexington / Ltd. Liability

**RSC LEXINGTON LLC** 

800 N LAKE DR

OAKLEAF VILLAGE OF LEXINGTON

800 N LAKE DR

LEXINGTON, SC 29072-2903 FACILITY #:803-808-3477

ANDERSON, MELANIE W PH#: 803-808-3477

Facility Email: MANDERSON@ROYAL-LEXINGTON.COM Fac. Cont. Email: MANDERSON@OAKLAFVILLAGE.COM

Total Number of Licensed Beds: 100

LEXINGTON, SC 29072-2903

Alzheimer Unit: Yes

Max # Beds: 27

Max # Residents: 100

Resident Beds: 100 Resident Rooms: 90 Staff Beds: 0 Staff Rooms: 0

CRC-0241 / 08/31/2014 (Renewal Pending)

OAKRIDGE COMMUNITY CARE HOME INC

Other Beds: 0 Other Rooms:

Spartanburg / Corporation

INMAN, SC 29349-0326

PO BOX 326

**OAKRIDGE COMMUNITY CARE HOME #1** 

2470 OLD MILL RD

Alzheimer Care: Yes

INMAN, SC 29349-9276 FACILITY #:864-472-6979

LAUGHTER, REBECCA H PH#: 864-472-6979

Facility Email: REBECCALAUGHTER@WINDSTREAM.NET

Fac. Cont. Email: BECK1041@EARTHLINK.NET

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 38

CRC-0429 / 04/30/2016

**PO BOX 326** 

Spartanburg / Corporation

INMAN, SC 29349-0326

CRC-1153 / 04/30/2016

Berkeley / Corporation

1818 S LIVE OAK DR

Resident Beds: 38 Resident Rooms: 13 Staff Beds: 1 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

**OAKRIDGE COMMUNITY CARE HOME #2** 

35 S HOWARD ST

INMAN, SC 29349-1339 FACILITY #:864-472-3062

MAST, DARRYL A PH#: 864-472-8258

Facility Email: BECK1041@EARTHLINK.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4

> Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

> > MONCKS CORNER, SC 29461-7216

OAKVIEW BOARDING HOME INC

OAKRIDGE COMMUNITY CARE HOME INC

**OAKVIEW BOARDING HOME** 

1818 S LIVE OAK DR

MONCKS CORNER, SC 29461-7216 FACILITY #:843-761-3273

BIASCAN, ERLINDA M PH#: 843-761-3273 BIASCANA@YAHOO.COM Facility Email:

Fac. Cont. Email: BIASCANA@YAHOO.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 10

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 10 Resident Rooms: 5

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1219 / 08/31/2016

2317 PRINCE ST

Georgetown / Corporation

OASIS RESIDENTIAL HOME

2317 PRINCE ST

GEORGETOWN, SC 29440-2925 FACILITY #:843-527-4848

HOUSER, KEISHA N PH#: 843-527-4848

Facility Email: OASISINC2001@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

OASIS RESIDE

GEORGETOWN, SC 29440-2925 OASIS RESIDENTIAL HOME INC

Alzheimer Care: Yes

Max # Residents: 6

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds 22

Resident Beds: 22 Resident Rooms: 11
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**OLIVER'S CARE HOME** 

1200 LAWHORN RD

BLYTHEWOOD, SC 29016-8975 FACILITY #:803-754-3585

OLIVER, BARBARA J PH#: 803-467-8204

Facility Email: CLINZY.OLIVER@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1480 / 08/31/2015 (Renewal Pending)

Richland / Limited Liability 1200 LAWHORN RD

BLYTHEWOOD, SC 29016-8975

OLIVER CARE HOME LLC

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

Total Number of Licensed Beds: 5

Resident Beds: 5 Resident Rooms: 3
Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

PADD-WREN HOME

2350 REGIONAL RD

FLORENCE, SC 29501-7028 FACILITY #:843-673-1005

MATTHEWS, KIMBERLY PH#: 843-673-1005

Facility Email: KIMBERLYMATTHEWS3971@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1451 / 07/31/2016

Florence / Non-Profit Corporation

2350 REGIONAL RD

FLORENCE, SC 29501-7028

PRESBYTERIAN AGENCY FOR THE DEVELOPMENTALLY DISABLED

INC

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

**Total Number of Licensed Beds** 6

Resident Beds: 6 Resident Rooms: 6
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**PAGELAND CARE FACILITY** 

206 S GUM ST

PAGELAND, SC 29728-2304 FACILITY #:843-672-5930

PH#:

Facility Email: PAGECARE@SHTC.NET

Fac. Cont. Email: No Facility Contact Email on Record

FUNDERBURK ASSOCIATES INC

CRC-0999 / 04/30/2016

PO BOX 697

Chesterfield / Corporation

LANCASTER, SC 29721-0697

Alzheimer Care: Yes Max # Residents: 8

Alzheimer Unit: Yes Max # Beds: 25

Total Number of Licensed Beds 58

Resident Beds: 58 Resident Rooms: 30
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1322 / 09/30/2015

Charleston / Corporation

PALMETTO RESIDENTIAL CARE OF NORTH CHARLESTON

2834 SPRUILL AVE

NORTH CHARLESTON, SC 29405-8051 FACILITY #:843-566-1509

LESESNE, CLARA P PH#: 843-744-1249

Facility Email:

EVERGREEN\_1818@HOTMAIL.COM

Fac. Cont. Email: EVERGREEN1818@MSN.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

Total Number of Licensed Beds: 12 Resident Beds:

PO BOX 31774

Staff Beds: 0 Other Beds:

0

12

CHARLESTON, SC 29417-1774 **EVERGREEN RESIDENTIAL CARE INC** 

Other Rooms: 0

6

0

Resident Rooms:

Staff Rooms:

PALMETTO RIDGE ASSISTED LIVING & MEMORY CARE

840 MANOR RD

CHERAW, SC 29520-4035 FACILITY #:843-537-4197

SMITH, REGINA PH#: 843-537-4197

Facility Email: CHERAWMANORASSIS@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 15

Alzheimer Unit: Yes

Max # Beds: 26

CRC-1393 / 03/31/2016

Chesterfield / Limited Liability

PO BOX 278

CHERAW, SC 29520-0278

PALMETTO RIDGE ASSISTED LIVING AND MEMORY CARE LLC

**Total Number of Licensed Beds** 106

Resident Beds: 106 Staff Beds:

Other Beds:

Staff Rooms: 0 Other Rooms:

Resident Rooms:

0

51

0

50

0

0

**PALMETTO VILLAGE OF CHESTER** 

570 CENTER ST

CHESTER, SC 29706-1342 FACILITY #:803-581-7319

WATTS, GLORIA (SUSIE) F PH#: 803-581-7319

Facility Email: SUSIE@BAYHOLDINGS.NET Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Alzheimer Unit: No

Max # Residents: 6

Max # Beds: 0

CRC-1399 / 06/30/2016 Chester / Ltd. Liability

842 W 4TH ST

WINSTON SALEM, NC 27101-2502

BHM OF CHESTER LLC

**Total Number of Licensed Beds: 100** 

Resident Beds: 100 Staff Beds:

0

Resident Rooms: Staff Rooms:

Other Rooms: Other Beds: 0

PALMETTOS OF CHARLESTON

1900 ASHLEY CROSSING DR

CHARLESTON, SC 29414-5751 FACILITY #:843-852-0505

MARTIN, MEGAN W PH#: 843-852-0505

MMARTIN@PALMETTOSOFCHARLESTON.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Max # Residents: 15

Alzheimer Unit: Yes Max # Beds: 15 CRC-1263 / 07/31/2016

Charleston / Limited Liability 1900 ASHLEY CROSSING DR

CHARLESTON, SC 29414-5751 NHC PLACE-CHARLESTON LLC

Total Number of Licensed Beds 60

Resident Beds: 60 Staff Beds: 0 Other Beds: 0

Resident Rooms: 60 Staff Rooms:

Other Rooms: 0

hlcrc.rdf

0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1503 / 03/31/2016

Greenville / Ltd. Liability

MAULDIN, SC 29662-0749

NHC HEALTHCARE/MAULDIN LLC

PO BOX 749

PALMETTOS OF MAULDIN

Alzheimer Care: Yes

810 E BUTLER RD

GREENVILLE, SC 29607-5842 FACILITY #:864-627-0803

DAVIS, KATHRYN H PH#: 864-675-6421

Facility Email: KDAVIS@THEPALMETTOSMAULDIN.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 60

CRC-1513 / 04/30/2016

7811 PARKLANE RD

CRC-1351 / 07/31/2016

DSL AL HOLDINGS LLC

CRC-0311 / 01/31/2016

935 PINEVIEW DR

DRUCILLA PARKER

Aiken / Sole Proprietorship

NEW ELLENTON, SC 29809-3302

Spartanburg / Limited Liability

SPARTANBURG, SC 29302-4473

2720 COUNTRY CLUB RD

Richland / Limited Liability

COLUMBIA, SC 29223-5620

PALMETTOS OF PARKLANE LLC

Alzheimer Unit: Yes

Max # Beds: 18

Max # Residents: 13

Resident Beds: 60 Resident Rooms: 45 0 Staff Rooms:

Staff Beds: 0 Other Beds: 0 Other Rooms: 0

PALMETTOS OF PARKLANE

7811 PARKLANE RD

COLUMBIA, SC 29223-5620 FACILITY #:803-741-7233

PH#:

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** Max # Residents: 10 **Total Number of Licensed Beds** 85

Alzheimer Unit: Yes Max # Beds: 24 Resident Beds: 85 Resident Rooms: 75 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

PARK PLACE

2720 COUNTRY CLUB RD

SPARTANBURG, SC 29302-4473 FACILITY #:864-591-1116

SAILORS, CARROLL PH#:

Facility Email: PPAL.ADM@MERIDIANSENIOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 32 **Total Number of Licensed Beds** 100

Alzheimer Unit: Yes Max # Beds: 0 Resident Beds: 100 Resident Rooms: 86

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

PARKER'S RESIDENTIAL CARE HOME

935 PINEVIEW DR

NEW ELLENTON, SC 29809-3302 FACILITY #:803-652-7290

PARKER, DRUCILLA O PH#: 803-652-7290

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** Resident Rooms: 9 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

PASSIONATE CARE COMMUNITY CENTER

2206 HERTFORD DR

COLUMBIA, SC 29210-6130 FACILITY #:803-834-4544

MARTIN, DONALD E PH#: 803-446-5234

Facility Email: MARTINDONALD492@YAHOO.COM

Fac. Cont. Email: L-MARTINK@YAHOO.COM

CRC-1500 / 12/31/2015

Richland / Sole Proprietorship

2206 HERTFORD DR

CRC-1391 / 05/31/2016

Florence /

COLUMBIA, SC 29210-6130

MARTIN, DONALD E

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

PEE DEE GARDENS

3117 W PALMETTO ST

FLORENCE, SC 29505-5937 FACILITY #:843-667-6699

SCOTT, SHERRI R PH#: 843-875-7163

Facility Email: SSCOTT@DEPAUL.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 22 Total Number of Licensed Beds 80

Alzheimer Unit: Yes Max # Beds: 22 Resident Beds: 80 Resident Rooms: 53
Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

CRC-0631 / 07/31/2012 (Renewal Pending)

DEPAUL ADULT CARE COMMUNITIES INC

PELION ELDERCARE

850 MAPLE ST

PELION, SC 29123-0206 FACILITY #:803-894-3646

BROWN, MARY W PH#: 803-564-5161

Facility Email: THEELDERCARES@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

adi della Emaili No i della de

Max # Residents: 6

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 39 Resident Rooms: 21

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PENDLETON MANOR

Alzheimer Care: Yes

414 SUMMIT DR

GREENVILLE, SC 29609-4821 FACILITY #:864-271-7562

FOWLER, AMANDA PH#:

Fac. Cont. Email: AMANDA@PENDLETONMANOR.COM
Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 24

Alzheimer Unit: Yes Max # Beds: 30

CRC-1455 / 08/31/2016 Greenville / Ltd. Liability

Lexington / Corporation

PELION, SC 29123-0039

Total Number of Licensed Beds: 39

PO BOX 39

TOMACO INC

414 SUMMIT DR

GREENVILLE, SC 29609-4821

GREENVILLE RETIREMENT PROPERTIES LLC

Total Number of Licensed Beds 65

Resident Beds: 65 Resident Rooms: 49
Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

120 ADDY LN

License#/Expiration County/Ownership Type Mailing Address Licensee

Lexington / Sole Proprietorship

PEOPLES RESIDENTIAL CARE

CRC-1494 / 03/31/2015 (Renewal Pending)

LEXINGTON, SC 29072-3405 FACILITY #:803-951-8591

WILLINGHAM, LYDIA PH#:

PEOPLES.RESIDENTIAL@YAHOO.COM Facility Email: TIFFANY PEOPLES, YVONNE HARRISON

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 15

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 15 Resident Rooms: 11

> Staff Beds: 2 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

CRC-1183 / 01/31/2016

WAGENER, SC 29164-1189

Aiken / Corporation

PO BOX 1189

TOMACO INC

PERRY ELDERCARE

182 ROBERTS ST E

SALLEY, SC 29137-8943 FACILITY #:803-564-5092

BROWN, MARY W PH#: 803-564-5092

Facility Email: No Facility Email on Record

Fac. Cont. Email: THEELDERCARES@AOL.COM

Alzheimer Care: Yes Max # Residents: 2 **Total Number of Licensed Beds** 14

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 14 Resident Rooms: 8

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

CHARLESTON, SC 29405-7050

CRC-1301 / 06/30/2016

PHAIRE, CARLTON

Orangeburg / Sole Proprietorship

12488 OLD NUMBER SIX HWY EUTAWVILLE, SC 29048

PETTIS ANGELS RESIDENTIAL CARE

CRC-0850 / 01/31/2016 2614 MADDEN DR Charleston / Sole Proprietorship

3879 WALNUT ST

NORTH CHARLESTON, SC 29405-5529 FACILITY #:843-308-9413

PETTIS, ETHEL S PH#: 843-308-9413

Facility Email: No Facility Email on Record ETHEL S PETTIS

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0 5 Resident Beds: Resident Rooms: 3

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

PHAIRE'S CARE AT KATURA SPRINGS

12488 OLD NUMBER SIX HWY

EUTAWVILLE, SC 29048-9167 FACILITY #:803-492-7122

PHAIRE, CARLTON PH#: 803-536-5002 PHAIREONE@AOL.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 48

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** Resident Rooms: 48 24

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

PIEDMONT PATHWAYS COMMUNITY RESIDENTIAL CARE FACILITY

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061-9525 FACILITY #:803-783-2273

SCOTT, GWENDOLYN PH#: 803-647-1152

Facility Email: DWP57@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1421 / 01/31/2016

CRC-0460 / 02/29/2016

798 HERMITAGE POND RD

CAMDEN, SC 29020-9534

SHARECARE CORPORATION

CRC-1406 / 11/30/2015

330 N WABASH AVE STE 3700

CHICAGO, IL 60611-7605

PINEWOOD AID OPCO LLC

CRC-0378 / 04/30/2016

KATHERINE W THOMAS

**PO BOX 544** 

Richland / Sole Proprietorship

BLYTHEWOOD, SC 29016-0544

Berkeley /

Kershaw / Corporation

Richland / State

5640 LOWER RICHLAND BLVD

HOPKINS, SC 29061-9525

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 15

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 15 Resident Rooms: 8

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PINEDALE RESIDENTIAL CENTER

798 HERMITAGE POND RD

CAMDEN, SC 29020-9534 FACILITY #:803-432-9900

HUDSON, PHILLIP E PH#: 803-432-9900

Facility Email: PHUDSON83@YAHOO.COM

Fac. Cont. Email: NONE

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 50

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 50 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PINEWOOD PLACE

101 CENTENNIAL BLVD

GOOSE CREEK, SC 29445-7079 FACILITY #:843-569-2520

WILLIAMS, CINDY PH#: 843-569-2520

Fac. Cont. Email: CINDYWILLIAMS@ENLIVANT.COM
Fac. Cont. Email: CINDYWILLIAMS@ENLIVANT.COM

Alzheimer Care: Yes Max # Residents: 4 Total Number of Licensed Beds 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 Resident Rooms: 39

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**PONDVIEW RESIDENTIAL CARE HOME #1** 

5342 HARDSCRABBLE RD

BLYTHEWOOD, SC 29016-9171 FACILITY #:803-735-0420

THOMAS, KATHERINE PH#: 803-735-0420

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 12

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 12 Resident Rooms: 6

Staff Beds: 2 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

PONDVIEW RESIDENTIAL CARE HOME #2

5338 HARDSCRABBLE RD

BLYTHEWOOD, SC 29016-9171 FACILITY #:803-735-0420

THOMAS, KATHERINE PH#: 803-735-0420

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1190 / 11/30/2015

Richland / Sole Proprietorship

PO BOX 544

BLYTHEWOOD, SC 29016-0544

KATHERINE W THOMAS

CRC-1173 / 09/30/2016

CRC-0014 / 04/30/2016

CRC-0387 / 06/30/2016

700 DAVEGA DR

Lexington / Non-Profit Corporation

LEXINGTON, SC 29073-9698

2817 ASHLAND RD

Laurens / Non-Profit Corporation

COLUMBIA, SC 29210-5009

PORT ROYAL, SC 29935-0129

Beaufort /

PO BOX 129

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

PORT ROYAL COMMUNITY RESIDENCE

1508 OLD SHELL RD

PORT ROYAL, SC 29935-1705 FACILITY #:843-255-6300

MAYSE, WANDA D PH#: 843-525-7684

Facility Email: WMAYSE@BCGOV.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 15

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 15 Resident Rooms: 8
Staff Beds: 0 Staff Rooms: 0

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BEAUFORT COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

PRESBYTERIAN HOME OF SOUTH CAROLINA-CLINTON (CRCF)

801 MUSGROVE ST

CLINTON, SC 29325-1796 FACILITY #:864-833-5190

HAIR, BRANDON T PH#: 864-859-4684

Facility Email: BRANDON.HAIR@PRESHOMESC.ORG
Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 81

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 81 Resident Rooms: 81

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

PRESBYTERIAN HOME OF SOUTH CAROLINA-COLUMBIA HOME (CRCF)

700 DAVEGA DR

LEXINGTON, SC 29073-9698 FACILITY #:803-796-8700

JACKSON, WILLIAM F PH#: 803-796-8700

Facility Email: FRAZIER.JACKSON@PRESHOMESC.ORG
Fac. Cont. Email: FRAZIER.JACKSON@PRESHOMESC.ORG

Alzheimer Care: Yes Max # Residents: 20 Total Number of Licensed Beds 91

Alzheimer Unit: Yes Max # Beds: 20 Resident Beds: 91 Resident Rooms: 91

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

PRESBYTERIAN HOME OF SOUTH CAROLINA-FLORENCE (CRCF)

2350 W LUCAS ST

FLORENCE, SC 29501-1201 FACILITY #:843-665-2222

HICKMAN III, WALTER E PH#: 843-665-2222

Facility Email: WHICKMAN@PRESHOMESC.ORG Fac. Cont. Email: WHICKMAN@PRESHOMESC.ORG

Alzheimer Care: Yes

Max # Residents: 2

Alzheimer Unit: Yes Max # Beds: 13 CRC-0242 / 09/30/2015

Florence / Non-Profit Corporation

2350 W LUCAS ST

FLORENCE, SC 29501-1201

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Total Number of Licensed Beds 47

Resident Beds: 47 Resident Rooms: 43

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA-FOOTHILLS (CRCF)

205 BUD NALLEY DR

EASLEY, SC 29642 FACILITY #:864-859-3367

MIZE, SIDNEY K PH#: 864-859-3367

Facility Email: SMIZE@PRESHOMESC.ORG

Fac. Cont. Email: JLEHEUP@PRESHOMESC.ORG

Alzheimer Care: Yes Max # Residents: 6

Alzheimer Unit: No Max # Beds: 0 CRC-1030 / 07/31/2016

Pickens / Non-Profit Corporation

205 BUD NALLEY DR EASLEY, SC 29642

CRC-0715 / 01/31/2016

CHINA GROVE, NC 28023

**Total Number of Licensed Beds** 29

0

610 E LIBERTY ST

Berkeley /

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

Total Number of Licensed Beds: 32 Resident Beds: 32

Resident Rooms: 32 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

QUALITY CARE RESIDENTIAL HOME

107 ETLING AVE

Alzheimer Care: No

GOOSE CREEK, SC 29445-3001 FACILITY #:843-863-0209

Max # Residents: 0

ESPANO, FE B PH#: 843-863-0209

Facility Email: FAYESPANO@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

QUALITY CARE RESIDENTIAL HOME SC INC

Other Beds:

Alzheimer Unit: No Max # Beds: 0 29 25

Resident Beds: Resident Rooms: Staff Beds: 0 Staff Rooms: 0 Other Rooms:

QUIET ACRES RETIREMENT HOME

2968 OLD DOUGLAS MILL RD

HODGES, SC 29653-8930 FACILITY #:864-446-2264

JOHNSON, MINNIE G PH#: 864-459-9892

Facility Email: QUIETACRESRESTHOME@YAHOO.COM Fac. Cont. Email: QUIETACRESRESTHOME@YAHOO.COM

Alzheimer Care: Yes Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0

CRC-0588 / 05/31/2016 Abbeville / Sole Proprietorship 2968 OLD DOUGLAS MILL RD HODGES, SC 29653-8930

MINNIE G JOHNSON

Total Number of Licensed Beds: 10

**Resident Beds:** 10 Resident Rooms: 5 Staff Beds: 2 Staff Rooms: 2

Other Beds: 0 Other Rooms:

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1321 / 12/31/2015

**PO BOX 388** 

Greenville / Limited Liability

GREER, SC 29652-0388

CRC-1283 / 04/30/2016

3959 FISH HATCHERY RD

GASTON, SC 29053-9038

Total Number of Licensed Beds 92

CRC-0053 / 03/31/2016

Richland / Corporation

1203 E MULLER AVE

CRC-0054 / 03/31/2016

Richland / Corporation

1203 E MULLER AVE

COLUMBIA, SC 29203-5926

REESE'S COMMUNITY CARE HOME INC

COLUMBIA, SC 29203-5926

REESE'S COMMUNITY CARE HOME INC

QUILLEN MANOR

709 QUILLEN AVE

FOUNTAIN INN, SC 29644-9444 FACILITY #:864-862-3252

EVANS, JOSEPH A PH#: 864-862-3252

Facility Email: ALLEY.COLEMAN@QUILLENMANORLIVING.COM

Fac. Cont. Email: JADAMS1512@YAHOO.COM

QUILLEN MANOR LLC

Max # Residents: 12 Total Number of Licensed Beds: 78

Alzheimer Unit: Yes Max # Beds: 12 Resident Beds: 78 Resident Rooms: 51

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Lexington / Limited Liability Limited Partnership

MASTERMIND LIMITED PARTNERSHIP LLP

RAPHA RESIDENTIAL CARE INC

3959 FISH HATCHERY RD

Alzheimer Care: Yes

GASTON, SC 29053-9038 FACILITY #:803-755-6541

PROSSER, PAULA C PH#: 803-642-8444

Facility Email: P\_PROSSER@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 92 Resident Rooms: 73

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**REESE'S COMMUNITY CARE HOME #1** 

1203 E MULLER AVE

COLUMBIA, SC 29203-5926 FACILITY #:803-786-1843

REESE JR, JAMES S PH#: 803-786-1843

Facility Email: JREESE1904@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 3

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

REESE'S COMMUNITY CARE HOME #2

717 CINDY DR

COLUMBIA, SC 29203-5205 FACILITY #:803-754-9798

REESE JR, JAMES S PH#: 803-786-1843

Facility Email: JREESE1904@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 5

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 3
Staff Beds: 2 Staff Rooms: 2

Staff Beds: 2 Staff Rooms: 2
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1456 / 11/30/2015

219 MIDDLEBURG DR

Horry / Corporation

**REFLECTIONS AT CAROLINA FOREST** 

219 MIDDLEBURG DR

Alzheimer Care: Yes

MYRTLE BEACH, SC 29579-3409 FACILITY #:843-903-0700

CLARDY JR, WALLACE D PH#: 843-997-0773

Facility Email: SONNY@REFLECTIONSASSISTEDLIVING.COM

Max # Residents: 2

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 42

CRC-1463 / 03/31/2016

Spartanburg / Corporation

410 ROLLING PINES LN

REID HOUSE INC

DUNCAN, SC 29334-8821

MYRTLE BEACH, SC 29579-3409

REFLECTIONS AT CAROLINA FOREST INC

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 42 Resident Rooms: 30

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**REID HOUSE** 117 DODD ST

WELLFORD, SC 29385-9475 FACILITY #:864-949-5120

DANIELS, KEISHA G PH#: 864-949-5120

Facility Email: KDANIELS@THE-REIDHOUSE.COM

Fac. Cont. Email: THEREIDHOUSEINC@AOL.COM

**Alzheimer Care: No** Max # Residents: 0 Total Number of Licensed Beds: 42

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 42 Resident Rooms: 21 Staff Beds: 0 **Staff Rooms:** 

Other Beds: 0 Other Rooms: 0

CRC-0771 / 05/31/2015 (Renewal Pending)

Spartanburg / Sole Proprietorship

726 OLD SPARTANBURG HWY

WELLFORD, SC 29385-9668

CRC-1207 / 12/31/2015

**PO BOX 307** 

RENAISSANCE LLC

Abbeville / Non-Profit Corporation

DUE WEST, SC 29639-0307

Total Number of Licensed Beds 20

JUDY DANIELS

**REID'S RESIDENTIAL CARE FACILITY** 

726 OLD SPARTANBURG HWY

WELLFORD, SC 29385-9668 FACILITY #:864-439-9238

DANIELS, JUDY C PH#: 864-439-9238

Facility Email: GARVINJUDY@BELLSOUTH.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 23

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 23 Resident Rooms: 10

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

RENAISSANCE

16 DR FRANK PRESSLY DR

DUE WEST, SC 29639 FACILITY #:864-379-2554

SHERARD, STEPHEN F PH#:

Facility Email: PPRIDMORE@COVENANTWAY.ORG Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 20

Resident Beds: Resident Rooms: 20 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1493 / 08/31/2016

Oconee / Corporation

115 GILLESPIE RD

RESIDENCES AT PARK PLACE

115 GILLESPIE RD

Alzheimer Care: Yes

SENECA, SC 29678-1126 FACILITY #:864-882-0783

HICKS, KYLE E PH#: 843-963-4956

Facility Email: SHWILLIAMS@MSA-CORP.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Unit: Yes

Max # Residents: 18

Max # Beds: 14

Total Number of Licensed Beds: 100

SENECA, SC 29678-1126

Resident Beds: 100 Resident Rooms: 73 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

AMERICAN SENIOR LIVING COMMUNITIES INC

**RESTING PLACE #1** 

207 E SHOCKLEY FERRY RD

ANDERSON, SC 29624-3731 FACILITY #:864-226-0990

TOUCHTON, MARY S PH#: 864-226-0990 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0499 / 11/30/2015

Anderson / Sole Proprietorship

PO BOX 13866

ANDERSON, SC 29624-0018

MARY SIMS TOUCHTON

**Total Number of Licensed Beds** 10

**Resident Beds:** 10 Resident Rooms: 5 Staff Beds: 1 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

**RICE ESTATE - ASSISTED LIVING** 

100 FINLEY RD

COLUMBIA, SC 29203-9264 FACILITY #:803-691-5740

PRIDMORE, ROBERT P PH#: 864-379-2554 Facility Email: RLYTLE@RICEESTATE.ORG

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1075 / 03/31/2016

Richland / Non-Profit Corporation

100 FINLEY RD

COLUMBIA, SC 29203-9264

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

Alzheimer Care: Yes Max # Residents: 14 Total Number of Licensed Beds: 40

Alzheimer Unit: Yes Max # Beds: 14 Resident Beds: 40 **Resident Rooms:** 40 Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

RIDGEVIEW COMMUNITY CARE HOMES UNIT A

217 CHANDLER RD

GREER, SC 29651-1290 FACILITY #:864-877-8599

DAUGHERTY, PATRICIA L PH#: 864-877-8599 RIDGEVIEW1@MSN.COM Facility Email:

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0559 / 01/31/2016 Greenville / Corporation 217 CHANDLER RD

GREER, SC 29651-1290

RIDGEVIEW COMMUNITY CARE HOMES INC

Total Number of Licensed Beds 11

**Resident Beds:** Resident Rooms: 11 6 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0560 / 01/31/2016

Greenville / Corporation

217 CHANDLER RD GREER, SC 29651-1290

RIDGEVIEW COMMUNITY CARE HOMES UNIT B

217 CHANDLER RD

GREER, SC 29651-1290 FACILITY #:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599

Facility Email: RIDGEVIEW1@MSN.COM

Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms: 5 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

RIDGEVIEW COMMUNITY CARE HOMES INC

RIDGEVIEW COMMUNITY CARE HOMES UNIT C

217 CHANDLER RD

GREER, SC 29651-1290 FACILITY #:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599

Facility Email: RIDGEVIEW1@MSN.COM Fac. Cont. Email: RIDGEVIEW1@MSN.COM

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0561 / 01/31/2016 Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290

RIDGEVIEW COMMUNITY CARE HOMES INC

**Total Number of Licensed Beds** 11

**Resident Beds:** 11 Resident Rooms: 6 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

RIDGEVIEW COMMUNITY CARE HOMES UNIT D

217 CHANDLER RD

GREER, SC 29651-1290 FACILITY #:864-877-8599 DAUGHERTY, PATRICIA L PH#: 864-877-8599

Facility Email: RIDGEVIEW1@MSN.COM Fac. Cont. Email: RIDGEVIEW1@MSN.COM

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

Greenville / Corporation 217 CHANDLER RD GREER, SC 29651-1290

CRC-0562 / 01/31/2016

RIDGEVIEW COMMUNITY CARE HOMES INC

**Total Number of Licensed Beds** 11

Resident Beds: 11 Resident Rooms: 6 0 0

Staff Beds: Staff Rooms: Other Rooms: Other Beds: 0 0

RILEYS RESIDENTIAL CARE HOME

2327 BRIAN CHRISTOPHER RD

GREAT FALLS, SC 29055-8844 FACILITY #:803-482-3290

GOODE-RILEY, BEVERLY PH#: 803-482-3290 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0900 / 10/31/2015 Chester / Sole Proprietorship 2327 BRIAN CHRISTOPHER RD GREAT FALLS, SC 29055-8844

**BEVERLY GOODE-RILEY** 

Total Number of Licensed Beds: 10

**Resident Beds:** 10 **Resident Rooms:** 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**RIVER OAKS** 

1251 LADYS ISLAND DR

PORT ROYAL, SC 29935-1106 FACILITY #:843-521-2298

BEERE, VALERIE PH#:

Facility Email: MBEAVER@HOLLINGERGROUP.COM Fac. Cont. Email: No Facility Contact Email on Record

CRC-0733 / 01/31/2016

Beaufort /

1251 LADYS ISLAND DR

PORT ROYAL, SC 29935-1106 CARE RSL PORT ROYAL OPCO LLC

Alzheimer Care: Yes Max # Residents: 5 Total Number of Licensed Beds 62

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 62 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

> > CRC-0516 / 08/31/2014 (Renewal Pending)

ROBIN'S RESIDENTIAL CARE FACILITY

1216 HYATT AVE

COLUMBIA, SC 29203-5932 FACILITY #:803-754-5097

JAMISON, LILLIAN R PH#: 803-754-5097 Facility Email: LILLIJAMIS@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

Richland / Corporation

COLUMBIA, SC 29230-3082

ROBIN'S RESIDENTIAL CARE INC

PO BOX 3082

**Resident Beds:** 9 Resident Rooms: 3 Staff Beds: 3 **Staff Rooms:** 3 Other Rooms: 0

Other Beds: 0

**ROCKHAVEN COMMUNITY CARE HOME** 

524 ROCKHAVEN DR

COLUMBIA, SC 29223-7805 FACILITY #:803-699-5361

BARNES, RICHIE D PH#: 803-699-5361 Facility Email: RBARNES5@SC.RR.COM

Fac. Cont. Email: RBARNES5@SC.RR.COM

CRC-0800 / 01/31/2016 Richland / Sole Proprietorship

524 ROCKHAVEN DR

COLUMBIA, SC 29223-7805

RICHIE D BARNES

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** 10

Resident Beds: 10 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 1 Other Rooms: Other Beds: 0 0

ROCKY RIVER BAPTIST ASSOCIATION RESIDENTIAL CARE HOME

250 UNION HIGH DR

BELTON, SC 29627-2445 FACILITY #:864-338-1410

TOUCHTON, JORDANA M PH#: 864-338-1410

ROCKYRIVERRCF@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2

Alzheimer Unit: No Max # Beds: 0 CRC-1270 / 04/30/2016

Anderson / Non-Profit Corporation

250 UNION HIGH DR BELTON, SC 29627-2445

**ROCKY RIVER BAPTIST ASSOCIATION** 

Total Number of Licensed Beds 28

Resident Beds: 28 Resident Rooms: 15 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0573 / 03/31/2016

1 HOKE SMITH BLVD OFC

GREENVILLE, SC 29615-5399

Greenville / Non-Profit Corporation

**ROLLING GREEN VILLAGE ASSISTED LIVING FACILITY** 

1 HOKE SMITH BLVD OFC

GREENVILLE, SC 29615-5399 FACILITY #:864-987-9800

Max # Residents: 22

TOERNER, RYAN J PH#:

Alzheimer Care: Yes

Facility Email: RYANT@ROLLINGGREENVILLAGE.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds: 52

CRC-1208 / 07/31/2016

INMAN, SC 29349-9160

CRC-1367 / 11/30/2015

PO BOX 35

Spartanburg / Ltd. Liability

PAULINE, SC 29374-0035

CRC-0327 / 12/31/2015

STATE PARK, SC 29147-0134

ROUSE COMMUNITY CARE HOME INC

Richland / Corporation

**PO BOX 134** 

ROSEWOOD ASSISTED LIVING LLC

200 FORTRESS DR

**ROLLING GREEN VILLAGE** 

Alzheimer Unit: Yes Max # Beds: 22 Resident Beds: 52 Resident Rooms: 50

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Spartanburg / Non-Profit Corporation

ROSECREST COMMUNITY RESIDENTIAL CARE

200 FORTRESS DR

INMAN, SC 29349-9160 FACILITY #:864-599-8600

LILLY, LORETTA PH#: 864-599-8600

Facility Email: JCLEMENTS@ROSECREST.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 14 Total Number of Licensed Beds 59

Alzheimer Unit: Yes Max # Beds: 14 Resident Beds: 59 Resident Rooms: 34 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

**ROSEWOOD ASSISTED LIVING** 

5221 HWY 215

PAULINE, SC 29374-1908 FACILITY #:864-573-4060

CLOBES, KIMBERLY H PH#: 864-573-4060

Facility Email: WIJG38@GMAIL.COM

Fac. Cont. Email: WIJG38@AOL.COM

Alzheimer Care: Yes Max # Residents: 10 Total Number of Licensed Beds 67

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 67 Resident Rooms: 33

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

ROUSE COMMUNITY CARE HOME #1

102 BALLENTON RD

COLUMBIA, SC 29203-9073 FACILITY #:803-788-1753

ROUSE, CHARLENE E PH#: 803-788-1753 **Facility Email:** MATRICEROUSE@AOL.COM

Fac. Cont. Email: MATRICEROUSE@AOL.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 8

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 4

Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0328 / 12/31/2015

Richland / Corporation

STATE PARK, SC 29147-0134

ROUSE COMMUNITY CARE HOME INC

**PO BOX 134** 

**ROUSE COMMUNITY CARE HOME #2** 

8809 WILSON BLVD

COLUMBIA, SC 29203-1817 FACILITY #:803-786-9357

ADDISON-DOCTOR, SARAH PH#: 803-736-0455 Facility Email: MATRICEROUSE@AOL.COM

Fac. Cont. Email: SARDCT@BELLSOUTH.NET

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 9 Resident Rooms: 3

> Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**ROUSE COMMUNITY CARE HOME #3** 

9316 WILSON BLVD

COLUMBIA, SC 29203-9769 FACILITY #:803-754-5720

ROUSE, CHARLENE E PH#: 803-754-5720 Facility Email: MATRICEROUSE@AOL.COM Fac. Cont. Email: MATRICEROUSE@AOL.COM

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 10

STATE PARK, SC 29147-0134

ROUSE COMMUNITY CARE HOME INC

CRC-0238 / 09/30/2015

Richland / Corporation

**PO BOX 134** 

**Resident Beds:** 10 Resident Rooms: 3 Staff Beds: 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

**ROYAL OAKS** 

CRC-0859 / 01/31/2016

950 TRAVELERS BLVD

BAZEN, TIFFANY R PH#: 843-832-8481

Facility Email: MBEAVER@HOLLINGERGROUP.COM

SUMMERVILLE, SC 29485-8213 FACILITY #:843-832-8481

Fac. Cont. Email: No Facility Contact Email on Record

Dorchester /

CARE RSL SUMMERVILLE OPCO LLC

Alzheimer Care: Yes

Max # Residents: 8

**Total Number of Licensed Beds** 53

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 53 **Resident Rooms:** 47 Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

RUDNICK CRCF

629 CHESTERFIELD ST

AIKEN, SC 29801-4053 FACILITY #:803-642-1041

DUNBAR, REPUNZEL PH#: 000-000-0000

RDUNBAR@AIKENTDC.ORG Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1429 / 02/29/2016

Aiken / County PO BOX 698

AIKEN, SC 29802-0698

TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

**Total Number of Licensed Beds** 

Resident Rooms: **Resident Beds:** 8 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**RUMPH'S RESIDENTIAL CARE** 

**574 PROGRESSIVE WAY** 

DENMARK, SC 29042-1873 FACILITY #:803-793-0068

COLLINS, SEBRINA C PH#: 803-793-0068 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0791 / 11/30/2015 Bamberg / Corporation **PO BOX 383** 

DENMARK, SC 29042-0383 RUMPH'S RESIDENTIAL CARE INC

**Total Number of Licensed Beds** 

Resident Beds: 8 Resident Rooms: Staff Beds: 0

Staff Rooms: 0 Other Rooms: 0

S & S ASSISTANCE HOUSING

800 HENDRIX ST

LEXINGTON, SC 29072-2540 FACILITY #:803-358-6573

HUNTER, KIMBERLY M PH#: 803-413-8586 Facility Email: KNOSLF@YAHOO.COM

Fac. Cont. Email: JJAY@MHA-SC.ORG

**Alzheimer Care: No** 

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

CRC-1526 / 09/30/2015

Lexington / Sole Proprietorship

0

PO BOX 1361

Other Beds:

LEXINGTON, SC 29071-1361 S & S ASSISTANCE HOUSING LLC

**Total Number of Licensed Beds** 

**Resident Beds:** 5 Resident Rooms: 3 Staff Beds: 2 **Staff Rooms:** 2 Other Beds: 0 Other Rooms: 0

S M STRONG'S COMMUNITY RESIDENTIAL CARE

65 DOVE ST

KINGSTREE, SC 29556-3146 FACILITY #:000-000-0000

STRONG, SUSIE M PH#: 843-354-3487 Facility Email: SMSTRONG1@YAHOO.COM Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

CRC-1195 / 02/28/2015 (Renewal Pending)

Williamsburg / Sole Proprietorship

150 VARNER AVE

GREELEYVILLE, SC 29056-8949

SUSIE M STRONG

Max # Residents: 0 **Total Number of Licensed Beds** 5

Alzheimer Unit: No Max # Beds: 0

5 Resident Beds: **Resident Rooms:** 3 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SANDERS CRCF

625 CHESTERFIELD ST

AIKEN, SC 29801-4053 FACILITY #:803-642-1044

DUNBAR, REPUNZEL PH#: 000-000-0000 RDUNBAR@AIKENDC.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1430 / 02/29/2016

Aiken / County PO BOX 698

AIKEN, SC 29802-0698

TRI-DEVELOPMENT CENTER OF AIKEN COUNTY INC

**Total Number of Licensed Beds** 

**Resident Beds:** Resident Rooms: 8 4 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SANDPIPER COURTYARD ASSISTED LIVING

1047 ANNA KNAPP BLVD

MOUNT PLEASANT, SC 29464-3133 FACILITY #:843-884-7977

DOLLASON, KRISTEN PH#: 843-884-7977

Facility Email: SJANSE@SANDPIPERCENTER.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1325 / 09/30/2015

Charleston / Limited Liability 1047 ANNA KNAPP BLVD

MOUNT PLEASANT, SC 29464-3133

SANDPIPER INDEPENDENT AND ASSISTED LIVING-DELAWARE LLC

Alzheimer Care: Yes Max # Residents: 5 Total Number of Licensed Beds 64

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 64 Resident Rooms: 57

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SAVANNAH HALL ASSISTED LIVING CRC-1431 / 06/30/2016

1010 LAKE HUNTER CIR Charleston /

MOUNT PLEASANT, SC 29464-5417 FACILITY #:843-388-2030

GILLESPIE, CRIS J PH#: 843-884-6949

Facility Email: CJGILLESPIE@5SQC.COM SNH SE SG TENANT LLC

Fac. Cont. Email: CJGILLESPIE@5SQC.COM

**Alzheimer Care: Yes** Max # Residents: 16 Total Number of Licensed Beds: 32

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 32 Resident Rooms: 28

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SAVANNAH PLACE CRC-1410 / 11/30/2015

1501 SECESSIONVILLE RD Charleston /

CHARLESTON, SC 29412-8236 FACILITY #:843-762-1396 330 N WABASH AVE STE 3700

SMITH, RAELYNN PH#: 843-762-1396 CHICAGO, IL 60611-7605 Facility Email: DORAGE@ALCCO.COM SAVANNAH AID OPCO LLC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 1 Total Number of Licensed Beds: 44

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 44 **Resident Rooms:** 39

> Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

> > CRC-0144 / 07/31/2016

Lexington / Corporation

PO BOX 2959

SC EPISCOPAL HOME AT STILL HOPES (CRCF)

1 STILL HOPES DR

WEST COLUMBIA, SC 29169-7164 FACILITY #:803-796-6490

ROBERTSON, NIKKI W PH#: 803-796-6490

WEST COLUMBIA, SC 29171-2959

BLUGMAYER@STILLHOPESORG SOUTH CAROLINA EPISCOPAL HOME AT STILL HOPES INC Facility Email:

Fac. Cont. Email: NROBERTSON@STILLHOPES.ORG

Alzheimer Care: Yes Max # Residents: 16 Total Number of Licensed Beds 24

Alzheimer Unit: Yes Max # Beds: 24 Resident Beds: 24 Resident Rooms: 24

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SECESSIONVILLE COMMUNITY RESIDENCE

1217 SECESSIONVILLE RD

CHARLESTON, SC 29412-9749 FACILITY #:843-762-2134

CAPERS, MADLYN PH#: 843-805-5820

Facility Email: DGOLDMINTZ@DSNCC.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1287 / 12/31/2015

CRC-0337 / 12/31/2015

**PO BOX 428** 

Oconee / Sole Proprietorship

SENECA, SC 29679-0428

WILBURN E HAMMERS

Charleston / State

PO BOX 22708, DISABILITIES BOARD OF CHARLESTON COUNT

CHARLESTON, SC 29413-2708

DISABILITIES BOARD OF CHARLESTON COUNTY

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SENECA RESIDENTIAL CARE CENTER

126 TOKEENA RD

SENECA, SC 29678-1744 FACILITY #:864-882-7390

HAMMERS, WILBURN E PH#: 864-882-7390 Facility Email: SENECARESIDENTIAL@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 Total Number of Licensed Beds: 33 **Alzheimer Care: No** 

Max # Beds: 0 Alzheimer Unit: No Resident Beds: 33 Resident Rooms: 27

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

**SERENITY MANOR** 

CRC-1472 / 02/28/2016

4018 S RHETT AVE Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-7163 FACILITY #:843-554-0733 PO BOX 21934

FIELDS, HATTIE B PH#: 843-425-4422 CHARLESTON, SC 29413-1934

Facility Email: HBFIELDS@BELLSOUTH.NET FIELDS, HATTIE B

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 2 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 6

> Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

> > CRC-1516 / 07/31/2016

704 SHELLEY RD

Orangeburg / Limited Liability

CHARLESTON, SC 29407-7023 SERENITY MANOR OF HOLLY HILL LLC

SERENITY MANOR OF HOLLY HILL

656 GARDNER BLVD

HOLLY HILL, SC 29059-8450 FACILITY #:803-496-3022

RILEY III, LUTHER PH#: 843-793-8731 Facility Email: LUTHER.RILEY@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Rooms: **Resident Beds:** 5 3 0

Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

SEVILLE'S RESIDENTIAL CARE FACILITY

109 BENNETT LN

HAMPTON, SC 29924-1375 FACILITY #:803-943-9131

JENKINS, GENORA W PH#: 803-943-9131

Facility Email: KAMILLE.JENKINS@GMAIL.COM Fac. Cont. Email: PEPPERFORCE@YAHOO.COM

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1178 / 08/31/2016 Hampton / Sole Proprietorship

109 BENNETT LN

HAMPTON, SC 29924-1375

**GENORA W JENKINS** 

Total Number of Licensed Beds 10

Resident Beds: 10 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SHADOW OAKS ASSISTED LIVING COMMUNITY

108 GREGG AVE

AIKEN, SC 29801-6816 FACILITY #:803-643-0300

WILLIAMS, SANDRA G PH#: 803-643-0300

Facility Email: SWILLIAMS@SHADOW-OAKS.COM

Fac. Cont. Email: SWILLIAMS@SHADOW-OAKS.COM

**Alzheimer Care: Yes** 

Max # Residents: 12

Alzheimer Unit: Yes Max # Beds: 12 CRC-1425 / 10/31/2015

Aiken / Ltd. Liability

108 GREGG AVE

AIKEN, SC 29801-6816

SHADOW OAKS ASSISTED LIVING COMMUNITY LLC

**Total Number of Licensed Beds** 56

Resident Beds: 56 Resident Rooms: Staff Beds: 0 Staff Rooms:

0 Other Beds: 0 Other Rooms: 0

SHEPHERD'S CARE CENTER

2100 N PLEASANTBURG DR

GREENVILLE, SC 29609-3156 FACILITY #:864-322-6212

THOMPSON, ERIC M PH#: 864-322-6212

Facility Email: ETHOMPSO@SHEPHERDSCARECENTER.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 10

Alzheimer Unit: Yes

CRC-1326 / 09/30/2015 Greenville / Ltd. Liability

2100 N PLEASANTBURG DR GREENVILLE, SC 29609-3156

SHEPHERD'S CARE CENTER LLC

Alzheimer Care: Yes Total Number of Licensed Beds: 90

Max # Beds: 19 Resident Beds: 90 Resident Rooms: 58

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

SHERMAN RESIDENTIAL CARE

20 MAYFIELD ST

GREENVILLE, SC 29601-1815 FACILITY #:864-242-0401

SHERMAN, OLISE S PH#: 864-242-0401

SHERMANRESCARE@GMAIL.COM Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Alzheimer Unit: No

Max # Beds: 0

Max # Residents: 1

CRC-1070 / 03/31/2016 Greenville / Partnership

20 MAYFIELD ST

GREENVILLE, SC 29601-1815

JESSE B SHERMAN SR AND OLISE SHERMAN

Total Number of Licensed Beds 16

**Resident Beds:** 16 Resident Rooms: 8 Staff Beds: 0 Staff Rooms: 0 Other Rooms: 0

Other Beds: 0

hlcrc.rdf

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0542 / 09/30/2015

**PO BOX 210** 

Pickens / Sole Proprietorship

SIX MILE, SC 29682-0210

WILBURN E HAMMERS

SIX MILE RETIREMENT CENTER

120 S MAIN ST

SIX MILE, SC 29682-9332 FACILITY #:864-868-9050

YORK, EDNA J PH#: 864-868-9050 SRETIREMENT@ATT.NET Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Residents: 0

Max # Beds: 0

Total Number of Licensed Beds: 41

Resident Beds: 41 Resident Rooms: Staff Beds: 0 Staff Rooms: Other Beds: 0 Other Rooms:

SOMERBY OF MOUNT PLEASANT

3100 TRADITION CIR

MOUNT PLEASANT, SC 29466-7153 FACILITY #:843-849-3096

FUNSCH, ROSEMARY S PH#:

Facility Email: 1KINSELLA@SOMERBYLIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 18

Alzheimer Unit: Yes Max # Beds: 38 CRC-1481 / 09/30/2015

Charleston / Ltd. Liability

2700 CORPORATE DR STE 125 BIRMINGHAM, AL 35242-2740

DOMINION SENIOR LIVING OF MT PLEASANT LLC

**Total Number of Licensed Beds: 118** 

Resident Beds: 118 **Resident Rooms:** 89 Staff Beds: Staff Rooms: 0

Other Beds: 0 Other Rooms:

0

25

0

0

SOUTH ISLAND ASSISTED LIVING

2902 S ISLAND RD

GEORGETOWN, SC 29440-4420 FACILITY #:843-545-5427

GILES, MAXINE J PH#: 843-545-5427 Facility Email: No Facility Email on Record

Fac. Cont. Email: MAXINE@SCCC.TV

CRC-1272 / 02/28/2016 Georgetown / Corporation

2902 S ISLAND RD

GEORGETOWN, SC 29440-4420 SOUTH ISLAND ASSISTED LIVING INC

Alzheimer Care: Yes Max # Residents: 3

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds: 32

Resident Beds: 32 Resident Rooms: 16 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**SOUTHERN HERITAGE** 

1713 CHARLESTON HWY

WEST COLUMBIA, SC 29169-5051 FACILITY #:803-796-3113

DOUGLAS SR, JONATHAN PH#: 803-796-3113 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-0993 / 03/31/2016 Lexington / Corporation

PO BOX 25215

COLUMBIA, SC 29224-5215 QUALITY CARE SERVICES INC

Total Number of Licensed Beds: 10

**Resident Beds:** 10 **Resident Rooms:** 4 Staff Beds: 1 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0611 / 12/31/2015

Greenville / Corporation

120 ROPER MOUNTAIN RD EXT GREENVILLE, SC 29615-4823

SOUTHERN OAKS PERSONAL CARE HOME

120 ROPER MOUNTAIN RD EXT

GREENVILLE, SC 29615-4823 FACILITY #:864-288-3271

MACKNEY, MARTHA M PH#: 864-288-3271

Facility Email: SO.OAKS@HOTMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 64

CRC-1155 / 04/30/2016

425 S WHEELER AVE

**ROY L BOWERS SR** 

Newberry / Sole Proprietorship

PROSPERITY, SC 29127-9347

EASTSIDE MANOR INC

Alzheimer Unit: Yes Max # Beds: 26 Resident Beds: 64 Resident Rooms: 64

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SOUTHSIDE RESIDENTIAL CARE

425 S WHEELER AVE

Alzheimer Care: Yes

PROSPERITY, SC 29127-9347 FACILITY #:803-364-0022

BOSTON, TONJA L PH#: 803-364-0022

Facility Email: SOUTHSIDE7375@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 30

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 30 Resident Rooms: 12

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

**SPRING PARK** CRC-1539 / 12/31/2015

925 N MAIN ST Greenville /

TRAVELERS REST, SC 29690-1553 FACILITY #:864-610-2435 PO BOX 6384

Max # Residents: 26

Facility Email: DLITTLE3@MINDSPRING.COM SPRING PARK ALF LLC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 24 Total Number of Licensed Beds 80

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 80 Resident Rooms: 66

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SPARTANBURG, SC 29304-6384

CRC-1250 / 02/28/2016

Newberry / Limited Liability

NEWBERRY, SC 29108-3084 NEWBERRY OPERATOR LLC

2006 SPRINGFIELD CIR

SPRINGFIELD PLACE RESIDENTIAL CARE

2006 SPRINGFIELD CIR

PH#:

NEWBERRY, SC 29108-3084 FACILITY #:803-405-1585

RANSDELL, TY L PH#:

Fac. Cont. Email: TRANSDELL@NEWBERRYCCRC.COM
Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 3 Total Number of Licensed Beds 50

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 50 Resident Rooms: 40

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CRC-1171 / 07/31/2016

CRC-1198 / 05/31/2016

Greenville / Ltd. Liability

CRC-1193 / 04/30/2016

YVONNE HARRISON

CRC-1311 / 12/31/2015

Richland / Corporation

51 WOODCROSS DR

COLUMBIA, SC 29212-2350

Lexington / Sole Proprietorship

4033 DELREE ST, PO BOX 31

WEST COLUMBIA, SC 29170-1532

SIMPSONVILLE, SC 29681-2622

214 E CURTIS ST

**CURTIS GROUP LLC** 

514 S GUM ST

Chesterfield / Corporation

PAGELAND, SC 29728-9143

SPRINGHILL ASSISTED LIVING

514 S GUM ST

PAGELAND, SC 29728-9143 FACILITY #:843-675-2500

ROBERTSON SR, ROBBIE L PH#: 843-675-2500

Facility Email: SPRINGHILLASSISTEDLIVING@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 3 Total Number of Licensed Beds 32

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 32 Resident Rooms: 22

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

HOSPICE OF CHESTERFIELD COUNTY INC

SPRINGS AT SIMPSONVILLE

Alzheimer Care: Yes

214 E CURTIS ST

SIMPSONVILLE, SC 29681-2622 FACILITY #:864-962-8570

DEWITT, JAMES A PH#: 864-962-8570

Facility Email: JIMD@CARAVITA.COM

Fac. Cont. Email: JIMD@CARAVITA.COM

Alzheimer Care: Yes Max # Residents: 16 Total Number of Licensed Beds 89

Alzheimer Unit: Yes Max # Beds: 16 Resident Beds: 89 Resident Rooms: 62

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

STEPHANIE'S RESIDENTIAL CARE FACILITY

4033 DELREE ST

WEST COLUMBIA, SC 29170-1526 FACILITY #:803-356-7542

PEOPLES, TIFFANY R PH#: 803-754-4594

Facility Email: STEPHANIES.RESIDENTIAL@YAHOO.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 12

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 12 Resident Rooms: 6

Staff Beds: 1 Staff Rooms: 1
Other Beds: 0 Other Rooms: 0

STERLING HOUSE OF HARBISON

51 WOODCROSS DR

COLUMBIA, SC 29212-2350 FACILITY #:803-732-0300

JORDAN, ALAN PH#: 803-741-2600

Facility Email: SHHARBISON@BROOKDALELIVING.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 13 Total Number of Licensed Beds 52

Alzheimer Unit: Yes Max # Beds: 12 Resident Beds: 52 Resident Rooms: 42

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

BROOKDALE SENIOR LIVING COMMUNITIES INC

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**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0570 / 02/28/2016

1027 BERKELEY DR

Orangeburg / Partnership

ORANGEBURG, SC 29118-8356

ALBERT STOKES AND DELAURA STOKES

STOKES RESIDENTIAL CARE

Alzheimer Care: No

2525 SAINT MATTHEWS RD

ORANGEBURG, SC 29118-1319 FACILITY #:803-533-0070

Max # Residents: 0

STOKES, ALBERT O PH#: 803-533-0070

Facility Email: STOKES411@SC.RR.COM

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 17

CRC-1514 / 04/30/2016

CRC-1113 / 09/30/2016

100 SUMMIT HILLS DR

CRC-1151 / 10/31/2015

Anderson / Limited Liability

CSL SUMMIT PLACE SC LLC

SUMMIT HILLS LLC

Spartanburg / Ltd. Liability

SPARTANBURG, SC 29307-1532

651 POLO RD

Richland / Limited Liability

COLUMBIA, SC 29223-2905

POLO ROAD ASSISTED LIVING LLC

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 17 Resident Rooms: 9

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SUMMERS LANDING POLO ROAD

651 POLO RD

COLUMBIA, SC 29223-2905 FACILITY #:803-788-9555

BERG, SHANNON J PH#: 843-667-6699

Facility Email: DBERG77777@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 14 Total Number of Licensed Beds 59

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 59 Resident Rooms: 24

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

SUMMIT HILLS ASSISTED LIVING COMMUNITY

100 SUMMIT HILLS DR

SPARTANBURG, SC 29307-1532 FACILITY #:864-591-2222

GOODWIN, ANNETTE S PH#: 864-591-2222

Facility Email: AGOODWIN@SUMMIT-HILLS.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 23 Total Number of Licensed Beds 79

Alzheimer Unit: Yes Max # Beds: 12 Resident Beds: 79 Resident Rooms: 64

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SUMMIT PLACE OF ANDERSON

107 PERPETUAL SQ

ANDERSON, SC 29621-1713 FACILITY #:864-222-9880

COOLEY, LARINDA PH#: 864-675-0220

Facility Email: ED@SUMMITOFANDERSON.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 28 Total Number of Licensed Beds 89

Alzheimer Unit: Yes Max # Beds: 32 Resident Beds: 89 Resident Rooms: 70

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1375 / 06/30/2016

Beaufort / Corporation

Total Number of Licensed Beds 87

CRC-1282 / 03/31/2016

Berkeley / Limited Liability

NEWTON, MA 02458-2094

CRC-1360 / 06/30/2016

Horry / Corporation

SNH SE DANIEL ISLAND TENANT LLC

**SUMMIT PLACE OF BEAUFORT** 

1119 PICK POCKET PLANTATION DR

BEAUFORT, SC 29902-3771 FACILITY #:843-770-0105

DEFINO, DERRICK V PH#: 843-884-4104

Facility Email: SARROYO@5SSL.COM SNH SE TENANT TRS INC

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 44

Alzheimer Unit: Yes Max # Beds: 44 Resident Beds: 87 Resident Rooms:

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

SUMMIT PLACE OF DANIEL ISLAND

320 SEVEN FARMS DR

DANIEL ISLAND, SC 29492-7532 FACILITY #:843-814-9238

DAVIS, SEAN C PH#: 843-762-1396

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 76

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 76 Resident Rooms: 59

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

400 CENTRE ST, FIVE STAR QUALITY CARE-LICENSING

SUMMIT PLACE OF NORTH MYRTLE BEACH

491 HWY 17

LITTLE RIVER, SC 29566-8082 FACILITY #:843-399-5662

JACKSON, THOMAS L PH#: 843-399-5662

Facility Email: No Facility Email on Record SNH SE N MYRTLE BEACH TENANT LLC

Fac. Cont. Email: MBESTATE@SCCOAST.NET

Alzheimer Care: Yes Max # Residents: 23 Total Number of Licensed Beds 80

Alzheimer Unit: Yes Max # Beds: 24 Resident Beds: 80 Resident Rooms: 71

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

Georgetown / Sole Proprietorship

ANDREWS, SC 29510-0732 MATTIE H DUROUSSEAU

CRC-0098 / 05/31/2016

PO BOX 732

SUNNY PINES BOARDING HOME

108 W GAPWAY RD

ANDREWS, SC 29510-6786 FACILITY #:843-221-7436

PAPILLION, GLORIA F PH#: 843-221-7436

Facility Email: SUNNYPINES57@MSN.COM

Fac. Cont. Email: SUNNYPINES57@MSN.COM

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 18

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 18 Resident Rooms: 10

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1428 / 12/31/2015

400 CENTRE ST

Charleston / Limited Liability

NEWTON, MA 02458-2094

SWEETGRASS COURT SENIOR LIVING COMMUNITY

1010 ANNA KNAPP BLVD

MOUNT PLEASANT, SC 29464-5400 FACILITY #:843-971-7756

CARLETON, KELLY J PH#: 843-971-7756

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes

Alzheimer Unit: Yes Max # Beds: 38

Max # Residents: 38 Total Number of Licensed Beds 38

Resident Beds: 38 Resident Rooms: 32 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

FIVE STAR QUALITY CARE-OBX OPERATOR LLC

SWEETGRASS VILLAGE ASSISTED LIVING COMMUNITY

601 MATHIS FERRY RD

MOUNT PLEASANT, SC 29464-2623 FACILITY #:843-881-9809

MCLEOD, LISA DICKEY PH#: 843-881-9809

Facility Email: LICENSING@5SQC.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 85

CRC-1427 / 12/31/2015

601 MATHIS FERRY RD

Charleston / Limited Liability

MOUNT PLEASANT, SC 29464-2623

Resident Beds: 85 Resident Rooms: 69 Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

FIVE STAR QUALITY CARE-OBX OPERATOR LLC

TALL PINES ASSISTED LIVING

1771 ELM RD

CHARLESTON, SC 29414-6343 FACILITY #:843-763-8134

GADSDEN, ADA R PH#: 843-763-8134

Facility Email: TALLPINESRCH@YAHOO.COM

Fac. Cont. Email: CGADSDEN@COMCAST.NET

CRC-0531 / 08/31/2015 (Renewal Pending)

Charleston / Sole Proprietorship

1771 ELM RD

CHARLESTON, SC 29414-6343

ADA R GADSDEN

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 5

5 Resident Beds: Resident Rooms: 3 Staff Beds: 2 Staff Rooms: 2 Other Rooms: Other Beds: 0 0

**TERRACE** 

230 S HEYWARD ST

BISHOPVILLE, SC 29010-1022 FACILITY #:803-692-6003

GAINEY, FELECIA H PH#: 803-692-6003 JEKOSR@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 CRC-1535 / 08/31/2015 (Renewal Pending)

Lee / Limited Liability 230 S HEYWARD ST

BISHOPVILLE, SC 29010-1022

TERRACE CRCF LLC

**Total Number of Licensed Beds**:

**Resident Beds:** 5 Resident Rooms: 5 Staff Beds: 2 Staff Rooms: 2 Other Beds: 0 Other Rooms: 0

## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0626 / 03/31/2016

Dillon / Corporation

702 W 3RD AVE

THORNE RETIREMENT HOME

702 W 3RD AVE

LAKE VIEW, SC 29563-3302 FACILITY #:843-759-9099

SANDERSON, JAMES N PH#: 843-759-9099

Facility Email: JNSANDERSON@CMCSENIORCARE.COM

Max # Residents: 0

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 76

CRC-0935 / 06/30/2016

213 LAURENS ST NW

AIKEN, SC 29801-3911

CRC-1356 / 04/30/2016

20 POWDERHORN RD

CRC-1210 / 05/31/2016

Lexington /

SEASHAR LLC

SIMPSONVILLE, SC 29681-3399

Richland / State

Aiken / Non-Profit Corporation

LAKE VIEW, SC 29563-3302

COOKE ARNETTE AND COOKE INC

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 76 Resident Rooms:

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: 0

Other Beds: 0

TRINITY ON LAURENS

Alzheimer Care: No

213 LAURENS ST NW

AIKEN, SC 29801-3911 FACILITY #:803-643-4203

HENRICH, CONSTANCE M PH#: 803-643-4200

Facility Email: CHENRICH@TRINITYONLAURENS.ORG

Fac. Cont. Email: CHENRICH@TRINITYLUTHERANSC.ORG

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 55

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 55 Resident Rooms: 55 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

PIEDMONT CENTER FOR MENTAL HEALTH SERVICES

LUTHERAN HOMES OF SOUTH CAROLINA INC (NPC)

**TURNING POINT CRCF** 

820 TOMS CREEK RD

HOPKINS, SC 29061-8798 FACILITY #:803-647-1152

WILLIAMS, RICK PH#: 803-898-8354

Facility Email: VCH47@SCDMH.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 15

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 15 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

TWILITE MANOR ADULT RESIDENTIAL CARE

2306 FORREST ST

CAYCE, SC 29033-2124 FACILITY #:803-794-7561 WEATHERFORD, JENNY G PH#: 803-794-7561 JENNY.WEATHERFORD@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 1 Total Number of Licensed Beds 28

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 28 Resident Rooms: 16

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

TYLER RESTMORE HOME

1681 BROUGHTON ST

ORANGEBURG, SC 29115-4873 FACILITY #:803-536-0740

ANTLEY, MICHELLE L PH#: 803-536-0740

Facility Email: MICHELLEANTLEY@ATT.NET

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0841 / 07/31/2016 Orangeburg / Ltd. Liability

TYLER RESTMORE HOME LLC

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 3

> Staff Beds: 2 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

TYLER RESTMORE HOME #2

195 SELLERS AVE

Facility Email:

ORANGEBURG, SC 29115-6724 FACILITY #:803-531-2074

No Facility Email on Record

ANTLEY, MICHELLE L PH#: 803-536-0740

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 1

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 

TYLER RESTMORE HOME LLC

CRC-0889 / 07/31/2016

Orangeburg / Ltd. Liability

**Resident Beds:** 9 Resident Rooms: 3 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms:

**UPSTATE RESIDENTIAL CARE** 

1302 S MCDUFFIE ST

ANDERSON, SC 29624-2745 FACILITY #:864-225-6901

KELLER, BOBBIE J PH#: 864-225-6901

Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0233 / 08/31/2014 (Renewal Pending)

Anderson / Sole Proprietorship

PO BOX 14922

ANDERSON, SC 29624-0036

HORACE, J ALEXANDER

Alzheimer Care: Yes Max # Residents: 1

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 10

Resident Beds: 10 Resident Rooms: 4

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

VANGUARD RESIDENTIAL SERVICES I

100 E HOSPITAL ST

MANNING, SC 29102-3158 FACILITY #:803-435-2330

RILEY, ROSALYN E PH#: 803-435-2330

Facility Email: THOMMYSCOTT@YAHOO.COM

Fac. Cont. Email: CCDSN@YAHOO.COM

CRC-1313 / 06/30/2016

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102-0040

VANGUARD RESIDENTIAL SERVICES INC

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** Resident Rooms: 8

8 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

**VANGUARD RESIDENTIAL SERVICES II** 

512 S CHURCH ST

MANNING, SC 29102-3122 FACILITY #:803-435-2330

RILEY, ROSALYN E PH#: 803-435-2330

Facility Email: THOMMYSCOTT@YAHOO.COM

Fac. Cont. Email: CCDSN@YAHOO.COM

CRC-1314 / 06/02/2016

Clarendon / Non-Profit Corporation

PO BOX 40

MANNING, SC 29102-0040

VANGUARD RESIDENTIAL SERVICES INC

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 8 Resident Rooms: 8

> Staff Beds: 0 Staff Rooms: 0 0 Other Rooms: 0

Other Beds:

Hampton /

**PO BOX 128** 

HAMPTON, SC 29924

CRC-1487 / 04/30/2016

1160 BERKLEY AVE

ADA O NWANKUDU

Florence / Sole Proprietorship

FLORENCE, SC 29505-3006

VANWYEVER RESIDENTIAL CARE FACILITY CRC-0638 / 06/30/2015 (Renewal Pending)

2009 COSGROVE AVE Charleston / Sole Proprietorship

NORTH CHARLESTON, SC 29405-5702 FACILITY #:843-744-6065 PO BOX 71184

FULTON, RHODELLE W PH#: 843-744-6065 NORTH CHARLESTON, SC 29415-1184

Facility Email: VANWYEVER1@AOL.COM RHODELLE W FULTON

Fac. Cont. Email: VANWYEVER1@AOL.COM

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 10 Resident Rooms: 5

Staff Beds: 1 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

VARNVILLE COMMUNITY RESIDENCE CRC-1211 / 05/31/2016

266 HAMPTON RD

VARNVILLE, SC 29944 FACILITY #:803-943-4818

MCQUIRE, ELISE S PH#: 803-943-4818

Facility Email: ELISEMAC@YAHOO.COM HAMPTON COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** R

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 8 Resident Rooms: 2

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

VICTORIAN HOME

313 WARLEY ST

FLORENCE, SC 29501-4730 FACILITY #:843-664-3090

NWANKUDU, ADA O PH#: 803-664-3090

ANWANKUDU@YAHOO.COM Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds**:

Alzheimer Unit: No Max # Beds: 0 **Resident Beds:** 5 Resident Rooms: 3

Staff Beds: 0 Staff Rooms: 1 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility Location Street Location City, State Administrator License#/Expiration
County/Ownership Type
Mailing Address
Licensee

CRC-0245 / 09/30/2016

CRC-0563 / 01/31/2016

Anderson / Corporation

CRC-0564 / 01/31/2016

Anderson / Corporation

CRC-0565 / 01/31/2016

Anderson / Corporation

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

PO BOX 5107

Dorchester / Non-Profit Corporation

201 W 9TH NORTH ST OFC 140

SUMMERVILLE, SC 29483-6701

VILLAGE AT SUMMERVILLE

201 W 9TH NORTH ST

SUMMERVILLE, SC 29483-6721 FACILITY #:843-873-2550

MILLER, ROBIN C PH#: 843-873-2550

Facility Email: RMILLER@PRESHOMESC.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 114

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 114 Resident Rooms: 86

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

PRESBYTERIAN HOME OF SOUTH CAROLINA INC

VILLAGE COMMUNITY CARE HOME-UNIT A

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 11

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 11 Resident Rooms: 6
Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**VILLAGE COMMUNITY CARE HOME-UNIT B** 

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 11

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 11 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0
Other Beds: 0 Other Rooms: 0

VILLAGE COMMUNITY CARE HOME-UNIT C

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE365@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 11

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 11 Resident Rooms: 6

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

VILLAGE COMMUNITY CARE HOME-UNIT D

1250 SALEM CHURCH RD

ANDERSON, SC 29625-1310 FACILITY #:864-225-4336

WILLIAMS, PHYLLIS S PH#: 864-225-4336

Facility Email: VILLAGECARE@GMAIL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0566 / 01/31/2016 Anderson / Corporation

PO BOX 5107

ANDERSON, SC 29623-5107

VILLAGE COMMUNITY CARE HOME INC

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds: 11

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 11 Resident Rooms: 6

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms:

0

VILLAGE INN COMMUNITY CARE HOME

112 POWELL ST

GRANITEVILLE, SC 29829-2906 FACILITY #:803-663-9495

AYERS, HAZEL L PH#: 803-279-1129

Facility Email: VILLAGEINNCCH@BELLSOUTH.NET Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Unit: No Max # Beds: 0 CRC-0396 / 04/30/2016 Aiken / Sole Proprietorship

112 POWELL ST

GRANITEVILLE, SC 29829-2906

MICHELE A HERRON

CRC-1080 / 04/30/2016

3300 OLD MANNING RD

JOHNNIE L WALTERS

SUMTER, SC 29150-9701

Sumter / Sole Proprietorship

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 10

**Resident Beds:** 10 Resident Rooms: 5 Staff Beds: 0 **Staff Rooms:** 0

Other Beds: 0 Other Rooms: 0

WALTERS BROTHERS RESIDENTIAL CARE FACILITY INC

110 GEDDINGS RD

SUMTER, SC 29150-8812 FACILITY #:803-506-2743

PH#:

Facility Email: JOHNNIE15@FTC-I.NET

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 6 Total Number of Licensed Beds 20

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 20 Resident Rooms: 10

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

WALTERS RESIDENTIAL CARE

821 DUKE AVE, 821-823

COLUMBIA, SC 29203-5651 FACILITY #:803-252-8918

PH#:

Facility Email: WALTERS1987@BELLSOUTH.NET Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 3 Alzheimer Unit: No Max # Beds: 0

CRC-0985 / 03/31/2016

Richland / Non-Profit Corporation

COLUMBIA, SC 29221-6263

Total Number of Licensed Beds 35

MIPD INC

PO BOX 211263

Resident Beds: 35 Resident Rooms: 18 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

WARE SHOALS MANOR

10 N GREENWOOD AVE

WARE SHOALS, SC 29692-1239 FACILITY #:864-456-7127

OBI-MELEKWE, BERNICE O PH#: 864-456-7127

Facility Email: BERNICE@HARMONYRES.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1457 / 10/31/2015 Greenwood / Ltd. Liability 483 LOCKHART LN

Spartanburg /

GAFFNEY, SC 29341-2841

HARMONY RESIDENTIAL CARE CENTER LLC

Alzheimer Care: No Max # Residents: 0 Total Number of Licensed Beds 24

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 24 Resident Rooms: 12

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WATERFORD AT DILLION POINTE ASSISTED LIVING & MEMORY CARE CRC-0893 / 06/30/2016

104 DILLON DR

SPARTANBURG, SC 29307-1018 FACILITY #:864-948-9300

BLAIR, SUSAN S PH#: 864-948-9300

Facility Email: KKOESTER@CAPITALSENIORLIVING.NET

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 13 **Total Number of Licensed Beds** 55

Alzheimer Unit: Yes Max # Beds: 20 Resident Beds: 55 Resident Rooms: 36

Staff Beds: 0 **Staff Rooms:** 0 Other Beds: 0 Other Rooms: 0

WE CARE RESIDENTIAL

**Alzheimer Care: Yes** 

2370 WILLISTON RD

AIKEN, SC 29803-9100 FACILITY #:803-652-3652

BUSH, ETHEL E PH#: 803-652-3652

Facility Email: BUSHHS@ATLANTICBB.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-1034 / 08/31/2015 (Renewal Pending) Aiken / Corporation

2394 WILLISTON RD AIKEN, SC 29803-9100 WE CARE RESIDENTIAL INC

CSL DILLION POINTE SC LLC

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 55

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 55 Resident Rooms: 27

> Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

WELLMORE OF TEGA CAY

111 WELLMORE DR

TEGA CAY, SC 29708-0039 FACILITY #:803-835-7100

RUSNAK, HEATHER PH#: 704-815-7344

Facility Email: HEATHER.RUSNAK@WELL-MORE.COM

Fac. Cont. Email: No Facility Contact Email on Record

CHP TEGA CAY SC TENANT CORP

CRC-1546 / 06/30/2016

York /

Alzheimer Care: Yes Max # Residents: 0 Total Number of Licensed Beds: 150

Alzheimer Unit: Yes Max # Beds: 30 Resident Beds: 150 Resident Rooms: 104 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

WESLEY COMMONS ASSISTED LIVING FACILITY & SPECIAL CARE HOUSE CRC-1218 / 08/31/2016

1110 MARSHALL RD

Greenwood / Non-Profit Corporation

GREENWOOD, SC 29646-4299 FACILITY #:864-227-7480

1110 MARSHALL RD

DAVIS, DORIS E PH#:

GREENWOOD, SC 29646-4299

KHOLMES@WESLEYCOMMONS.ORG Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

WESLEY COMMONS

Alzheimer Care: Yes

Max # Residents: 12

Total Number of Licensed Beds 56

Alzheimer Unit: Yes Max # Beds: 12 Resident Beds: 56 Resident Rooms: 47 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0

Spartanburg / Limited Liability

CRC-1289 / 12/31/2015

Other Rooms:

0

95

WESLEY COURT ASSISTED LIVING COMMUNITY

916 WESLEY CT

BOILING SPRINGS, SC 29316-5649 FACILITY #:864-599-9929 916 WESLEY CT

TURNAGE, HEATHER R PH#: 864-599-9929

BOILING SPRINGS, SC 29316-5649

Facility Email: JENNYA@TUTERA.COM WESLEY COURT ASSISTED LIVING FACILITY LLC

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** 

Max # Residents: 0

**Total Number of Licensed Beds** 65

Alzheimer Unit: No Max # Beds: 0

Resident Beds: 65 Resident Rooms: 57 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

**WESLEYAN SUITES** 

2100 TWIN CHURCH RD

FLORENCE, SC 29501-8200 FACILITY #:843-664-0700

TABOR, TERESSA L PH#: 843-664-0700

Facility Email: TTABOR@METHODIST-MANOR.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0662 / 12/31/2015

Florence / Non-Profit Corporation

2100 TWIN CHURCH RD FLORENCE, SC 29501-8200

UNITED METHODIST MANOR OF THE PEE DEE

Alzheimer Care: Yes Alzheimer Unit: Yes

Max # Residents: 12

Max # Beds: 12

Total Number of Licensed Beds: 95

95 Resident Beds: Resident Rooms:

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

WEST END RETIREMENT CENTER INC

200 S 5TH ST

EASLEY, SC 29640-2826 FACILITY #:864-859-4370

BLIHAR, DEBRA PH#:

Facility Email: AMBER.WESTEND@OUTLOOK.COM Fac. Cont. Email: No Facility Contact Email on Record

CRC-0204 / 08/31/2015 (Renewal Pending)

Pickens / Corporation

200 S 5TH ST

EASLEY, SC 29640-2826

WEST END RETIREMENT CENTER INC

Alzheimer Care: No Max # Residents: 0

Alzheimer Unit: No Max # Beds: 0 Total Number of Licensed Beds: 34

Resident Beds: 34 Resident Rooms: 14 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-0580 / 09/30/2016

1330 INDIA HOOK RD

York / Non-Profit Corporation

ROCK HILL, SC 29732-2462

WESTMINSTER TOWERS RESIDENTIAL

1330 INDIA HOOK RD

Alzheimer Care: No

ROCK HILL, SC 29732-2462 FACILITY #:803-328-5000

STAMPER, AMANDA L PH#: 803-328-5000

Facility Email: MSTAMPER@WESTMINSTERTOWERS.ORG

Fac. Cont. Email: No Facility Contact Email on Record

Total Number of Licensed Beds 29

CRC-0907 / 11/30/2015

COLUMBIA, SC 29202-7905

WESTSIDE RESIDENTIAL HOME INC

Richland / Corporation

Richland / Corporation

CRC-1334 / 09/30/2016

400 WEBBER RD

Spartanburg / Corporation

SPARTANBURG, SC 29307-2400

WHITE OAK ESTATES ASSISTED LIVING INC

COLUMBIA, SC 29224-5584

MURRY'S COMMUNITY CARE HOME INC

PO BOX 25584

PO BOX 7905

Alzheimer Unit: Yes Max # Beds: 0 Resident Beds: 29 Resident Rooms: 29

> Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

WESTMINSTER PRESBYTERIAN CENTER INC

Max # Residents: 0

WESTSIDE RESIDENTIAL HOME

4112 HARTFORD ST

COLUMBIA, SC 29204-3025 FACILITY #:803-786-7411

JOHNSON, LOVICE D PH#: 803-786-7411 Facility Email: JENTOMMATT@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 38

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 38 Resident Rooms: 11 Staff Beds: 0 **Staff Rooms:** 

Other Beds: 0 Other Rooms: 0

CRC-0210 / 08/31/2007 (Renewal Pending)

WHITAKER COMMUNITY CARE HOME

79 SAL SUE CT

COLUMBIA, SC 29224-2383 FACILITY #:803-786-8561

ANDERSON, VALENCIA W PH#:

Facility Email: MSVSLITTLE@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 5

Staff Beds: 0 Staff Rooms: 0 Other Beds: Other Rooms: 0 0

WHITE OAK ESTATES ASSISTED LIVING

400 WEBBER RD

SPARTANBURG, SC 29307-2400 FACILITY #:864-579-7004

GIBBS, TAMMY L PH#: 803-684-0035

Facility Email: TGIBBS@WHITEOAKMANOR.COM Fac. Cont. Email: TGIBBS@WHITEOAKMANOR.COM

Alzheimer Care: Yes Max # Residents: 2

Total Number of Licensed Beds 45

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 45 Resident Rooms: 30 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

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## **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

WHITNEY PLACE 107 CORNWELL ST

UNION, SC 29379-2404 FACILITY #:864-427-4275

PH#:

WHITNEYPLACE@ATT.NET Facility Email: Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Residents: 0

Alzheimer Unit: No

Max # Beds: 0

CRC-0572 / 02/28/2016 Union / Corporation 107 CORNWELL ST UNION, SC 29379-2404

WHITNEY CORPORATION OF COLUMBIA INC

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms: Staff Beds:

0 Staff Rooms: 0 0 Other Rooms: 0

WILDEWOOD DOWNS ASSISTED LIVING COMMUNITY

731 POLO RD

COLUMBIA, SC 29223-4462 FACILITY #:803-788-5115

STUDNICKA, STEPHANIE PH#: 803-788-5115

Facility Email: SSTUDNICKA@WILDEWOOD-DOWNS.COM

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: Yes** 

Max # Residents: 8

Alzheimer Unit: Yes

Max # Beds: 8

CRC-1271 / 03/31/2016

Richland / Ltd. Liability

731 POLO RD

Other Beds:

COLUMBIA, SC 29223-4462

WILDWOOD DOWNS RETIREMENT LLC

**Total Number of Licensed Beds** 57

Resident Beds: 57 Resident Rooms: 49 Staff Beds: 0 **Staff Rooms:** Other Beds: 0 Other Rooms: 0

WILLIAMS COMMUNITY CARE HOME

7705 RICHARD ST

COLUMBIA, SC 29209-3733 FACILITY #:803-783-1223

WILLIAMS, CHARLES A PH#: 803-783-1223 Facility Email: No Facility Email on Record

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No

Max # Beds: 0

Alzheimer Unit: No

Max # Residents: 0

CRC-0280 / 11/30/2015

Richland / Sole Proprietorship

PO BOX 90031

COLUMBIA, SC 29290-1031 CHARLES A WILLIAMS SR

**Total Number of Licensed Beds** q

Resident Beds: 9 **Resident Rooms:** 4 Staff Beds: 1 Staff Rooms: 1

Other Beds: Other Rooms: 0 0

WILLIAMSBURG RESIDENTIAL CARE FACILITY

14 WRCF ST

KINGSTREE, SC 29556-2596 FACILITY #:843-355-6214

PH#:

WRCF@FTC-I.NET Facility Email:

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No Alzheimer Unit: No

Max # Beds: 0

Max # Residents: 0

CRC-0038 / 03/31/2016

Williamsburg / Sole Proprietorship

PO BOX 63

SALTERS, SC 29590-0063 JACKSON, JACQUES G

Total Number of Licensed Beds 24

Resident Beds: 24 Resident Rooms: 9 Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

CRC-1485 / 12/31/2015

PO BOX 3311

WILLIAMS, TRACY L

Sumter / Sole Proprietorship

SUMTER, SC 29151-3311

WILLIE S II RCH 46 WILSON ST

SUMTER, SC 29150-3050 FACILITY #:803-773-4724

WILLIAMS, TRACY L PH#: 803-236-1415 Facility Email: ACETW90@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 5 Resident Rooms: 3 Staff Beds: 0 Staff Rooms: 0

Other Beds: 0 Other Rooms: 0

5

WILLOWS OF EASLEY

Alzheimer Care: No

105 WILLOW PL

EASLEY, SC 29640-1385 FACILITY #:864-855-9800

BOLTON, SUSAN W PH#: 864-855-9800

Facility Email: KEVIN@THEWILLOWSOFEASLEY.COM Fac. Cont. Email: KEVIN@THEWILLOWSOFEASLEY.COM

Alzheimer Care: Yes Max # Residents: 7

Alzheimer Unit: No Max # Beds: 0 **Total Number of Licensed Beds** 50

EASLEY, SC 29641-1807

WILLOWS OF EASLEY INC

CRC-0944 / 06/30/2016

Pickens / Corporation

PO BOX 1807

Resident Beds: 50 Resident Rooms: 48 Staff Beds: 0 Staff Rooms: Other Rooms: 0

Other Beds: 0

CRC-1388 / 01/31/2016 WINDSOR HOUSE GREENVILLE

1931 PELHAM RD Greenville /

GREENVILLE, SC 29615-4002 FACILITY #:864-288-9450 1351 PELHAM RD

PIZZOLA, KITTY J PH#: 864-288-3331 GREENVILLE, SC 29615-3645

Facility Email: CLAY.FOWLERHEALTHCAREENTERPRISE@GMAIL.CO WINDOR HOUSE GREENVILLE-FHE LLC

Fac. Cont. Email: MDAVIDSON@CAPITALSENIORLIVING.NET

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 50

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 50 Resident Rooms: 37

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

CRC-1369 / 11/30/2015

WHW ASSOCIATES LLC

PO BOX 6384

Spartanburg / Ltd. Liability

SPARTANBURG, SC 29304-6384

WINDSOR HOUSE WEST

850 JOHN B WHITE SR BLVD

SPARTANBURG, SC 29306-4034 FACILITY #:864-576-8910

GARRISON, ANDY PH#:

Facility Email: ED@WINDSORHOUSEALCOM

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: Yes Max # Residents: 42 Total Number of Licensed Beds: 108

Alzheimer Unit: Yes Max # Beds: 45 Resident Beds: 108 Resident Rooms: 75

Staff Beds: 0 Staff Rooms: 0 Other Beds: 0 Other Rooms: 0

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

WOODARD'S COMMUNITY CARE HOME I

615 W EVANS ST

FLORENCE, SC 29501-3409 FACILITY #:843-665-4940

EADDY, MARCOLA C PH#: 843-968-8089

Facility Email: RC@AOL.COM

Fac. Cont. Email: No Facility Contact Email on Record

CRC-0301 / 08/31/2015 (Renewal Pending)

Florence / Sole Proprietorship

**PO BOX 255** 

FLORENCE, SC 29503-0255

MARCOLA EADDY

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 9 Resident Rooms: 4

> Staff Beds: 1 Staff Rooms: 1 Other Beds: 0

**PO BOX 268** 

DIANNE E WRIGHT

CRC-1319 / 07/31/2016

Spartanburg / Sole Proprietorship

WELLFORD, SC 29385-0268

CRC-0617 / 01/30/2016

Spartanburg / Sole Proprietorship

WELLFORD, SC 29385-0268

0 Other Rooms:

WRIGHT'S RESIDENTIAL CARE #1

950 OLD SPARTANBURG HWY

WELLFORD, SC 29385 FACILITY #:864-249-0412

WRIGHT, DIANNE E PH#: 864-249-0412

Facility Email: DIWRIGHT57@YAHOO.COM

Fac. Cont. Email: DDIANE40SC@AOL.COM

**Alzheimer Care: No** Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 Resident Rooms: 4 Staff Beds: 0 **Staff Rooms:** 

Other Beds: 0 Other Rooms: 0

WRIGHT'S RESIDENTIAL CARE #2 A & B

12 RIVER ST, 12A & 12B

LYMAN, SC 29365-1714 FACILITY #:864-249-0412

WRIGHT, DIANNE E PH#: 864-949-6437 Facility Email: DIWRIGHT57@YAHOO.COM

Fac. Cont. Email: DIWRIGHT57@YAHOO.COM

**PO BOX 268** 

DIANNE E WRIGHT

Alzheimer Care: No Max # Residents: 0 **Total Number of Licensed Beds** 10

Alzheimer Unit: No Max # Beds: 0 Resident Beds: 10 **Resident Rooms:** 5

Staff Beds: 0 Staff Rooms: 0 Other Rooms: Other Beds: 0 0

YOUNGBLOOD'S ASSISTED LIVING HOME

1500 FORK AVE

IRMO, SC 29063-9459 FACILITY #:803-740-4861 YOUNGBLOOD, ANGELA S PH#: 803-740-4861 YOUNGBLOODS@SC.RR.COM Facility Email:

Fac. Cont. Email: YOUNGBLOODS@SC.RR.COM

Alzheimer Care: Yes Max # Residents: 5

Alzheimer Unit: No Max # Beds: 0

CRC-1433 / 02/28/2016 Lexington / Sole Proprietorship

1500 FORK AVE

IRMO, SC 29203-9115 ANGELA S YOUNGBLOOD

**Total Number of Licensed Beds** 

**Resident Beds:** 5 Resident Rooms: 3 Staff Beds: 1 Staff Rooms: 1

Other Beds: 0

Other Rooms:

0

#### **SCDHEC**

September 4, 2015

#### **Community Residential Care Facilities**

**DHEC Regulation 61-84** 

Name of Facility **Location Street** Location City, State Administrator

License#/Expiration County/Ownership Type Mailing Address Licensee

ZEIGLER STREET COMMUNITY RESIDENCE

CRC-1297 / 06/30/2016

71 ZEIGLER ST

BAMBERG, SC 29003-1034 FACILITY #:803-245-6169

JAMES, GLORIA M PH#: 803-793-5003

GLORIAJ\_29059@YAHOO.COM Facility Email:

BAMBERG COUNTY DISABILITIES AND SPECIAL NEEDS BOARD

Fac. Cont. Email: No Facility Contact Email on Record

Alzheimer Care: No **Alzheimer Unit: No** 

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** 9

**Resident Beds:** 9 Staff Beds:

Bamberg /

**Resident Rooms:** 5

0

**Staff Rooms:** 0

Other Beds:

0

Colleton / Sole Proprietorship

CRC-1529 / 10/31/2015

Other Rooms: 0

**ZION HOUSE A** 

121 MOORE ST

HITCHMAN, MARTINA E PH#: 803-259-7472

WALTERBORO, SC 29488-4463 FACILITY #:843-782-3238

Facility Email:

CLIJLW@YAHOO.COM

WILLIAMS, BARBARA A

Fac. Cont. Email: No Facility Contact Email on Record

**Alzheimer Care: No Alzheimer Unit: No** 

Max # Residents: 0

Max # Beds: 0

**Total Number of Licensed Beds** 

**Resident Beds:** 4 Resident Rooms: 3

Staff Beds: Other Beds: 0 0 **Staff Rooms:** 

Other Rooms:

0 0

Total Number of Facilities: 470

Alzheimers Care: 182

Alzheimers Units: 94 Licensed Beds: 17,448

Resident Beds:

17,448 Resident Rooms: 12,576 Staff Beds : Staff Rooms: 101

124

Other Beds : Other Rooms:

0